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FLORIDA/FOREIGN LIMITED LIABILITY CO.

Lindgren & Associates, LLC

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MAR 17 2009

EXAMINER

FAX AUDIT # 4090000610643

**ARTICLES OF ORGANIZATION
OF
Lindgren & Associates, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Lindgren & Associates, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:
8035 Lakeside Drive, Yalaha, Florida 34797.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Richard Lindgren, 8035 Lakeside Drive,
Yalaha, Florida 34797. Located in the County of Lake.

ARTICLE IV DURATION

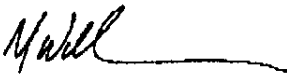
The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name
address of the manager of the Limited Liability Company is:

Richard Lindgren, 8035 Lakeside Drive, Yalaha, Florida 34797

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Business Filings Incorporated, Organizer
Mark Williams, A.V.P.
Authorized Representative
Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,
WI 53717
(608) 827-5300

Date: March 12, 2009

FAX AUDIT # 4090000610643

FAX AUDIT # 4090000610663CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Lindgren & Associates, LLC**

The name and address of the registered agent and office is Richard Lindgren, 8035 Lakeside Drive, Yalaha, Florida 34797. Located in the County of Lake.

Having been named as registered agent and to accept service of process for the above stated company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature: Richard Lindgren

Richard Lindgren

Date: 3/13/09

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