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**FOLEY** FOLEY & LARONER LLP

ATTORNEYS AT LAW ONE INDEPENDENT DRIVE, SUITE 1300 JACKSONVILLE, FLORIDA 32202-5017 P.O. BOX 240 JACKSUNVILLE, FLORIDA 32201-0240 TELEPHONE: 904.359.2000 FACSIMILE: 901.359.8700 WWW.FOLEY.COM

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#### **ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

#### **ARTICLE 1 - Name:**

The name of the Limited Liability Company is: CLIENT FIRST INVESTMENTS II, LLC

#### **ARTICLE II -- Address:**

The mailing address and street address of the principal office of the Limited Liability Company are: 902 Clint Moore Road, Suite 104, Boea Raton, FL 33487.

# ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature: The name and the Florida street address of the registered agent are: <u>F&I. Corp.</u> Name <u>One Independent Drive, Suite 1300</u> Florida street address (P.O. Box NOT acceptable) <u>Jacksonville, FL 32202</u> City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability 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 completed performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

F&L CORP.

Bv: Chauncey W. Lever, Jr.

Authorized Signatory

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

<u>Robert S. Bernstein, Authorized Representative of Member</u> Typed or printed name of signee

> FILING FEES: \$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent \$30.00 Certified Copy (OPTIONAL) \$5.00 Certificate of Status (OPTIONAL)