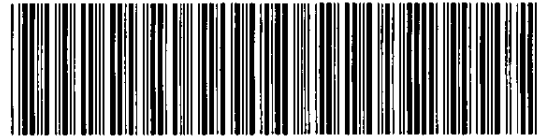


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06/30/09--01004--022 **125.00

(Requestor's Name)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
09 JUN 30 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

JUN 30 2009

EXAMINER

CORP DIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: Kim Weidenbach

DATE: 06/30/09

REF. #: 000672.106428

CORP. NAME: N4384S, LLC

FILED
09 JUN 30 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 530836 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

ARTICLES OF ORGANIZATION
OF
N4384S, LLC

FILED
09 JUN 30 PM 2:45
TALLAHASSEE, FLORIDA

1. Name. The name of this limited liability company is **N4384S, LLC** (the "Company"), and it shall be formed as a limited liability company under Chapter 608 of the laws of the State of Florida.

2. Duration. The Company shall exist from the date of filing of these Articles of Organization with the Florida Secretary of State, and the Company's existence shall be perpetual.

3. Purpose. The Company is organized for the purpose of transacting all lawful activities and businesses that may be conducted by a limited liability company under the laws of Florida.

4. Place of Principal Office. The mailing and street address of the Company's principal office is **6830 Central Avenue, Suite A, St. Petersburg, FL 33707.**

5. Registered Agent and Office. The name of the initial registered agent of the Company is **James R. Spoor**. The street address of the initial registered agent of the Company is **100 N. Tampa Street, Suite 2700, Tampa, FL 33602.**

6. Management of the Company. The management of the Company shall be vested in the member of the Company. The initial member of the Company is **F. Gordon Spoor**.

7. Operating Agreement. The members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

8. Additional Members. Additional members to the Company may be admitted, but only upon the consent of all of the other members of the Company at the time admission is sought, or as may otherwise be permitted under the Company's Operating Agreement.

The undersigned executed these Articles of Organization this 29th day of June, 2009.

In accordance with Section 608.408(3), *Florida Statutes*, the execution of these Articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



James R. Spoor,
Authorized Representative of Member

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within-named Company, at the place designated herein, and being familiar with the obligations of that position, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

By: _____


James R. Spoor

Dated: June 29, 2009