Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

: (850)878-5368 Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Devannex, LLC

Certificate of Status Certified Copy 0 Page Count 03 Estimated Charge \$125.00

T. CLINE

JUL -8 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Devannex, LLC (Must end with the words "Lin | nited Liability Company, "L. L.C.," or "LLC."] | - N |
|---|---|------------|
| ARTICLE II - Address: | | SEC 35 |
| The mailing address and street address | of the principal office of the Limited Liability Co | TALLER JUL |
| Principal Office Address: | Mailing Address: | ASSET 1 |
| 475 CENTRAL AVENUE, SUITE 305 | 475 CENTRAL AVENUE, BUITE 305 | mo - F |
| ST. PETERSBURG, FLORIDA 35701 | 51. PETERSBURG, FLORIDA 33701 | of ST |
| | | 7 JAIL 78 |
| | gistored Office, & Registered Agent's Signatur own Registered Agent You must designate un individual or wood | |

Chris Sanders, Esq.

Name

Sanders Law Group, 2958 1st Avenue N.

Florida street address (P.O. Box NOT acceptable)

St. Petersburg, FL 33713

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 complete 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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

| <u>Title:</u> "MGR" = Manager | Name and Address: | |
|---|---|----------------------|
| "MGRM" = Managing Member | | |
| MGR | OPTANNEX, LLC | |
| | 475 CENTRAL AVENUE, SUITE 305 | |
| | ST. PETERSBURG, FLORIDA 33701 | |
| | | ···· |
| | | -ZES |
| | | |
| | | 一芸艺 |
| | | - KR |
| | | 뜻위 |
| | | — 53 |
| | | - GRIE |
| (Use attachment if necessary) | | ;;= - |
| CLE V: Effective date, if other than the frective date is listed, the date must in the days after the date of filing.) REQUIRED SIGNATURE: | te date of filing: (OP) be specific and cannot be more than five busine | HONAL) us days pr |
| | | |
| | | |
| Signature of w memb | per or an authorized representative of a member. | |
| (In accordance with s of this document cons that the facts stated | ection 608.408(3). Florida Statutes, the execution stitutes an affirmation under the penalties of perjucy herein are true.) | |
| | R. Patrick Marston | |
| r | t. Patrick Marstori | |

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Filing Fees: