

To: The Florida Dept. of State
Subject: 001869.107909.1

From: Ashley Smith

Tuesday, July 28, 2009 11:56 AM Page: 1 of 6

Division of Corporations

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Florida Department of State

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To:

Division of Corporations
Fax Number : (850)617-6333

From:

Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850)222-1173
Fax Number : (850)224-1640

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001869.107909.1

FLORIDA/FOREIGN LIMITED LIABILITY CO.

LMF FAMILY, LLC

Certificate of Status	0
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EXAMINER

H09000171363 3

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ARTICLES OF ORGANIZATION

LMF FAMILY, LLC
a Florida limited liability company

ARTICLE I
NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

LMF FAMILY, LLC

ARTICLE II
PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company shall be:

2364 Burton Ln.
Sarasota, FL 34239

ARTICLE III
INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Lorelei D. Michaels
2364 Burton Ln.
Sarasota, FL 34239

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H09000171363 3

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ARTICLE IV
MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations or Operating Agreement of the Limited Liability Company.

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the 24th day of July, 2009.

By: 

Lorelei D. Michaels

"Authorized Representative"

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H09000171363 3

H09000171363 3

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

LMF FAMILY, LLC

2. The name and the Florida street address of the registered agent is:

**Gregory S. Band
One South School Ave., Suite 500
Sarasota, FL 34237**

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: _____


Gregory S. Band

"REGISTERED AGENT"

Audit#

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H09000171363 3