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To:

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From:

Account Name

: SHUMAKER, LOOP & KENDRICK LLP

Account Number: 075500004387 Phone

: (813)229-7600

Fax Number

: (813)229-1660

ORIDA/FOREIGN LIMITED LIABILITY CO.

SH MERGER SUBSIDIARY II, LLC

Certificate of Status	0
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EXAMINE

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# ARTICLES OF ORGANIZATION SH MERGER SUBSIDIARY II, LLC

### ARTICLE I - Name:

The name of the Limited Liability Company is SH MERGER SUBSIDIARY II, LLC.

### ARTICLE II - Address:

The street and mailing address of the principal office of the Limited Liability Company

is:

101 East Kennedy Blvd., Suite 2800 Tampa, Florida 33602

ARTICLE III - Registered Agent and Registered Office:

The name and the Florida street address of the registered agent are:

Corporation Service Company 1201 Hays Street Tallahassee, Florida 32301-2525 2009 SEP 23 AM 9: 32 SECRETARY OF STATE ALLAHASSEE, FLORIDA

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 23rd day of September, 2009.

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.)

Paul R. Lynch

Typed or printed name of signee

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- The name of the limited liability company is SH MERGER SUBSIDIARY II, LLC.
- 2. The name and the Florida street address of the registered agent are:

Corporation Service Company 1201 Hays Street Tallahassee, Florida 32301-2525

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.

Doreen Wallace

Assistant Vice President