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**EXAMINER** 

### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • .1-800-342-8062 • Fax (850) 222-1222

PROVIDENCE INVI	ESTMENTS (	OF POLK		
COUNTY, LLC				
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			- - - -	Art of Inc. File  LTD Partnership File  Foreign Corp. File
			<b>—</b>	L.C. File  Fictitious Name File
				Trade/Service Mark
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				Art. of Amend. File
			<u> </u>	RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
			<b>✓</b>	Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
			· ·	Certificate of Fictitious Name
				Corp Record Search
				Officer Search
			<b> </b>	Fictitious Search
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#### ARTICLE I - NAME

The name of the limited liability company is PROVIDENCE INVESTMENTS OF POLK COUNTY, L.L.C., ("company").

#### ARTICLE II - ADDRESS

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

Principal Office Address:

Mailing Address:

250 AVE K, SW STE 100 WINTER HAVEN FL 33880 250 AVE K, SW STE 100 WINTER HAVEN FL 33880

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

RICHARD E. STRAUGHN 255 MAGNOLIA AVENUE WINTER HAVEN, FL 33880

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..

RICHARD E. STRAUGHN

#### ARTICLE IV - MANAGERS OR MANAGING MEMBERS

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGMR" = Managing Member

MGR

RICHARD E. STRAUGHN 255 MAGNOLIA AVENUE WINTER HAVEN, FL 33880

**REQUIRED SIGNATURE:** 

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.)

RICHARD E. STRAUGHN

Typed or printed name of signee