

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : FOLEY & LARDNER  
Account Number : 072720000061  
Phone : (904) 359-2000  
Fax Number : (904) 359-8700

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
Westcott Holding, LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

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Electronic Filing Menu

Corporate Filing Menu

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JUN 29 2010

EXAMINE

Fax Audit No. H10000149947

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The name of the Limited Liability Company is: Westcott Holding, LLC

**ARTICLE II – Address:**

The mailing address and street address of the principal office of the Limited Liability Company are:  
4250 Lakeside Drive, Suite 212, Jacksonville, Florida 32210.

**ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:**

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

F&L CORP.

Name

ONE INDEPENDENT DRIVE, SUITE 1300

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

JACKSONVILLE, FL 32202

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 completed 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.*

F&L CORP.

By: Charles V. Hedrick

Charles V. Hedrick, Authorized Signatory

(An additional article must be added if an effective date is requested)

Charles V. Hedrick

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.)

Charles V. Hedrick, Authorized Signatory

Typed or printed name of signer

**FILING FEES:**

\$100.00 Filing Fee for Articles of Organization

\$25.00 Designation of Registered Agent

\$30.00 Certified Copy (OPTIONAL)

\$5.00 Certificate of Status (OPTIONAL)

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TALLAHASSEE, FLORIDA

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