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Florida Department of State
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FLORIDA LIMITED LIABILITY CO.

T. Price & Associates, LLC

Certificate of Status	0
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Page Count	03
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C. LEWIS

JUL 14 2010

EXAMINER

FAX AUDIT #

H100000110000413

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**ARTICLES OF ORGANIZATION
OF
T. Price & Associates, LLC**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the limited liability company shall be: T. Price & Associates, LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 508 Broken Limb Place, Brandon, Florida 33510.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

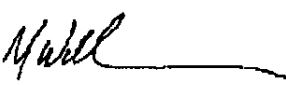
The name and address of the initial registered agent is: Anne M. Price, 508 Broken Limb Place, Brandon, Florida 33510. Located in the County of Hillsborough.

ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:
Anne M. Price, 508 Broken Limb Place, Brandon, Florida 33510



Business Filings Incorporated, Organizer
Mark Williams, A.V.P.
Authorized Representative
Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,
WI 53717
608-827-5300

Date: July 1, 2010

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: T. Price & Associates, LLC

The name and address of the registered agent and office is Anne M. Price, 508 Broken Limb Place, Brandon, Florida 33510. Located in the County of Hillsborough.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: _____

Anne M. Price

Date: 07/06/2010

State of Florida
County of Hillsborough

The foregoing instrument was acknowledged before me this 6th day of July, 2010 by Anne M. Price who is personally known to me.

NOTARY PUBLIC-STATE OF FLORIDA
Timothy M. Walker
Commission #DD803009
Expires: AUG. 29, 2012
BONDED THROUGH ATLANTIC BONDING CO., INC.

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