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(City/State/Zip/Phone #)

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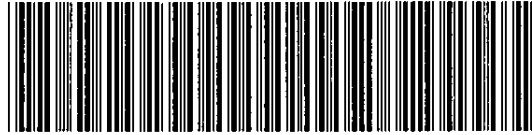
(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 AUG 19 AM 10:15

B. KOHR

AUG 25 2010

EXAMINER

	Advanced Incorporating Service, Inc.
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Phone: 850-222-CORP
Fax: 850-575-2724
Email: orders@advancedincorporating.com
Website: www.advancedincorporating.com

NAME OF ENTITY <hr/> <hr/> <hr/> <hr/>	FOR OFFICE USE ONLY <div style="transform: rotate(-45deg); transform-origin: center;"> FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 10 AUG 19 AM 11 15 </div>
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PICK ONE:

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FILING:

 CORPORATION LLC LIMITED PARTNERSHIP GENERAL PARTNERSHIP

_____ FICTITIOUS NAME _____ SERVICEMARK/TRADEMARK _____ AMENDMENT

 FOREIGN QUALIFICATION JUDGMENT LIEN

OTHER

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APOSTILLE/CERTIFICATION REQUEST:

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Amount of Documents _____

DATE _____ TIME _____

Notes: _____

**ARTICLES OF ORGANIZATION FOR
MYERS FAMILY MANAGEMENT, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

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ARTICLE I - NAME

The name of the Limited Liability Company is: **MYERS FAMILY MANAGEMENT, LLC**

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: **712 S. Oakwood, Brandon, Florida 33511**

ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be: **Until dissolved pursuant to its Operating Agreement.**

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the members. The names and addresses of the managing members are:

**Harold J. Myers
712 S. Oakwood
Brandon, Florida 33511**

**Stacy A. Myers
712 S. Oakwood
Brandon, Florida 33511**

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

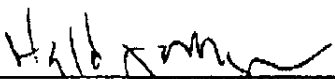
The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: **Additional members may be admitted only as unanimously agreed upon by the Members as set forth in the Operating Agreement.**

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: **Only with the consent of all the remaining Members.**

IN WITNESS WHEREOF, these Articles of Organization have been signed, as Managing Members, by: **Harold J. Myers and Stacy A. Myers.**

Dated this 5th day of May, 2010.


**Harold J. Myers
Managing Member**

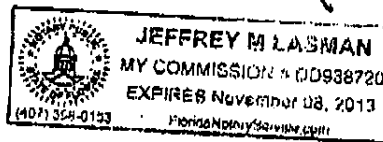

**Stacy A. Myers
Managing Member**

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 5th day of May, 2010, by
Harold J. Myers and **Stacy A. Myers**, who have produced Florida Driver Licenses as identification.



Jeffrey M. Lasman, Notary Public



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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **MYERS FAMILY MANAGEMENT, LLC**
2. The name and address of the registered agent and office is:

**Jeffrey M. Lasman, Esquire
LASMAN LAW FIRM, P.A.
6152 Delancey Station Street, Suite 205
Riverview, Florida 33578**

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.



Jeffrey M. Lasman

May 5, 2010
(Date)