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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : CSH SERVICES, LLC
Account Number : I20073000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

L. SELLERS
OCT 11 2010
EXAMINER

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

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FLORIDA LIMITED LIABILITY CO.

Baumgardner Management, LLC

Certificate of Status	0
Certified Copy	0
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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608 and/or 621, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

BAUMGARDNER MANAGEMENT, LLC

ARTICLE II ADDRESS

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

11891 MAGNOLIA FALLS DRIVE
JACKSONVILLE, FLORIDA 32258**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

PAULA BAUMGARDNER
11891 MAGNOLIA FALLS DRIVE
JACKSONVILLE, FLORIDA 32258

Having been named as registered agent 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.

x Paula Baumgardner
PAULA BAUMGARDNER / Registered Agent's signature

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BAUMGARDNER MANAGEMENT, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER

PAULA BAUMGARDNER

11891 MAGNOLIA FALLS DRIVE

JACKSONVILLE, FLORIDA 32258

MANAGING MEMBER

STEPHENS BAUMGARDNER, JR.

11891 MAGNOLIA FALLS DRIVE

JACKSONVILLE, FLORIDA 32258

x Paula Baumgardner

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.

PAULA BAUMGARDNER