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FLORIDA LIMITED LIABILITY CO. Winterset Realty, LLC

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ARTICLES OF ORGANIZATION FOR WINTERSET REALTY, LLC A Florida Limited Liability Company

The undersigned, desiring to form a limited liability company under and pursuant to Chapter 608, Florida Statutes, the Florida Limited Liability Company Act, does hereby adopt the following Articles of Organization for such Company:

ARTICLE I Name

The name of this Company shall be Winterset Realty, LLC.

ARTICLE II Duration

The term of existence of the Company shall commence upon the filing of these Articles of Organization and shall be perpetual.

ARTICLE III Mailing Address

The mailing address of the principal office of this Company is 308 Quails Run Pass, Winter Haven, FL 33884. The street address of the principal office of this Company is 308 Quails Run Pass, Winter Haven, FL 33884.

ARTICLE IV Registered Agent and Office

The name and street address of this Company's initial registered agent for service of process in this state is as follows: K. Wade Foster, 308 Quails Run Pass, Winter Haven, FL 33884.

ARTICLE V <u>Management</u>

The Company is to be a manager-managed company.

ARTICLE VI

Operating Agreement of Company

The power to adopt, alter, amend or repeal the Operating Agreement of the vested in the Members. shall be vested in the Members.

Page 1 of 3

IN WITNESS WHEREOF, the undersigned, an authorized representative of the Company, has hereunto set his hand and seal this // Way of October ... 2010.

K. Wade Foster

STATE OF FLORIDA COUNTY OF POLK

(SEAL)

Print Name of Notary

My commission expires:

Jane M. Murphy-LaFrandre
Commission # DD 872821
Expires April 24, 2013
Bearard Thru Teoy Felh Insurance 800-106-7018

(((H10000223327 3)))

STATEMENT OF REGISTERED AGENT

Having been named as Registered Agent for Winterset Realty, LLC and to accept service of process for the company, 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 in Chapter 608, Florida Statutes.

K. Wade Foster

STATE OF FLORIDA COUNTY OF POLK

The foregoing instrument was acknowledged before me this // day of <u>Problet</u> 2010, by K. Wade Foster, who is personally known to me, or who produced his current drivers' license as identification.

(SEAL)

Print Name of Notary

My Commission Expires:

