Oct. 22. 2010 3:52PM 407-886-0087 No. Division of Corporations Florida: Department of State Division of Corporation Electronic Filing Cover Sheet	7412 P. 1 Bigs I of 1
Note: Please print this page and use it as a cover sheet. Type the fax audit m (shown below) on the top and bottom of all pages of the document. (((H10000231840 3)))	umber
H100002318403ABCT Note: DO NOT hit the REFRESH/RELOAD button on your browser from this Doing so will generate another cover sheet.	page.
To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : MCLEOD, MCLEOD & MCLEOD, P.A. Account Number : 076635001571 Phone : (407)886-3300 Fax Number : (407)886-0087 **Enter the email address for this business entity to be used for f annual report mailings, Enter only one email address please.* Email Address:	FILED 2010 OCT 22 AH 8: 51 SECRETARY OF STATE FALLAHASSEE, FEDRIDA
FLORIDA LIMITED LIABILITY CO. FLOMOTION, LLC Certificate of Status Certified Copy Page Count O5 Estimated Charge S125.00	j. saulsberry Examiner OCT 25 2010

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ARTICLES OF ORGANIZATION FOR <u>FLOMOTION, LLC</u> 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

<u>Name</u>

The name of this Company shall be FLOMOTION, LLC.

ARTICLE II Duration

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

ARTICLE III Mailing Address

The mailing address is 4121 North Woodland Boulevard, Deland, Florida 32723. The street address is 4121 North Woodland Boulevard, Deland, Florida 32723.

ARTICLE IV Registered Agent and Office

The name and street address of the initial registered agent and office for this Company is as follows: CAMIEL M. CANTERS, 4121 North Woodland Boulevard, Deland, Florida 32723.

ARTICLE V

Admission of Additional Members; Terms and Conditions of such Admissions

Additional Members may be admitted upon unanimous consent of the Members of the Company, upon the written application of such new Member, in the manner set forth in the Operating Agreement of this Company.

Page 1

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ARTICLE VI Right to Continue Business

If, but for the exercise of the right to continue the Company's business, as specified below, 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 Company, shall cause the dissolution of the Company, then the business of the Company shall continue (without dissolution) if elected, in writing, within ninety (90) days of the occurrence of such event by any remaining Member.

ARTICLE VII

Management by Members

The Company will be managed by its Members. The name and address of the initial Managing Member is:

CAMIEL M. CANTERS 4121 North Woodland Boulevard Deland, Florida 32723

ARTICLE VIII Regulations of Company

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

ARTICLE IX Informal Action of Members

Any action of the Members may be taken without a meeting if consent in writing setting forth the action so taken shall be signed by all Members who would be entitled to vote upon such action at a meeting and filed with the Company as part of its records.

ARTICLE X

Transferability of Member's Interest

An interest of a Member of this Company may be transferred or assigned only to such extent and in the manner provided in the Operating Agreement.

Page 2

Oct. 22. 2010 3:53PM 407-886-0087

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IN WITNESS WHEREOF, the undersigned has hereunto set his hand this 22 day of tobe 2010.

STATE OF FLORIDA COUNTY OF ORANGE

The foregoing instrument was acknowledged before me this 22 mday of October, 2010, by <u>CAMIEL M. CANTERS</u>, who $(\sqrt{\text{one}})$ is personally known to me or produced 85

identification,

(SEAL)

1 NOTARY PUBLIC RAYMOND A. MCLEOD Commission DD 738778 Expires March 25, 2012 Print Name of Mary Bary Border New Tray Fan Insurance 000-385-701

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My Commission Expires:

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STATEMENT OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above-stated limited liability company, I, <u>CAMIEL M. CANTERS</u> 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.

CAMTEL M. CANTERS

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STATE OF FLORIDA COUNTY OF ORANGE

The foregoing instrumen	t was acknowled	lged before me this 22 ¹¹ da	y of October, 201	0,
by CAMIEL M. CANTERS, wi	10 (V one) <u></u>	is personally known to me or	produce	ed
	as 	identification.	LALASE CARE L	2010 OCT
(SEAL)		NOTARY PUBLIC		22 A
		My Commission Explorement	ND A. MCLEOD, ssion DD 758778 March 25, 2012	14 12 12

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