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Albert C. Eaton, Esquire
P. O. Box 530054
Orlando, FL 32843-0054

(Address)

(City/State/Zip/Phone #)

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MAIL

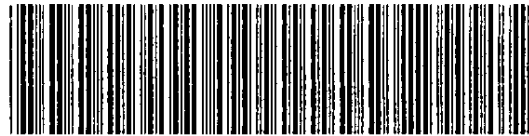
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

D. BRUCE

FEB 21 2011

EXAMINER

Albert C. Eaton
Attorney and Counselor at Law
1516 East Colonial Drive, Suite 100E
Orlando, Florida 32803

Mailing Address:
P. O. Box 530054
Orlando, Florida 32853-0054

Telephone
(407) 843-8100
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(407) 897-6986

February 16, 2011

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Articles of Organization
ROSE DISTRIBUTORS, LLC

Dear Sir:

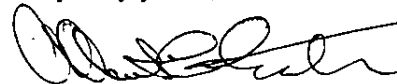
Enclosed please find an original and one copy of the Articles of Organization as above captioned, and our check in the amount of \$160.00, representing:

Filing Fee	\$ 100.00
Designation of Registered Agent	25.00
Certified Copy	30.00
Certificate of Status	5.00

When the Articles have been processed, we would appreciate the return of the Certified Copy and the Certificate of Status to our attention.

Thank you for your consideration in this matter.

Very truly yours,



Albert C. Eaton

ACE/JM
Enclosures

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY

The undersigned, being natural persons competent to contract, and for the purpose of forming a Florida Limited Liability Company under the provisions of the Florida Limited Liability Company Act does hereby adopt the following articles of organization:

ARTICLE I

NAME

The name of the Limited Liability Company is:

ROSE DISTRIBUTORS, LLC

ARTICLE II

ADDRESS

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

4103 Neptune Road, Saint Cloud, Florida 34769

ARTICLE III

PURPOSE OR PURPOSES

The purpose or purposes for which this Limited Liability Company is created for is to engage in any or all lawful business or trade which can, in the opinion of the Managers, can be advantageously carried on and as permitted under the Florida Limited Liability Company Act.

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TALLAHASSEE, FLORIDA

ARTICLE IV

REGISTERED OFFICE AND AGENT

The street address of the initial registered agent of the Limited Liability Company is 4103 Neptune Road, Saint Cloud, Florida 34769, and the name of its initial registered agent at such address is SONYA E. SMITH.

ARTICLE V

MANAGERS

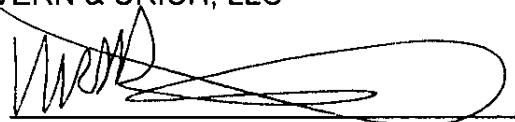
The Limited Liability Company is a member-managed company. The names and addresses of each entity which is to serve as member-managers are:

<u>Name</u>	<u>Address</u>
LOVERN & URICH, LLC	2501 Kaley Wood Court, Saint Cloud, FL 34773
SMITH & OLIVER, LLC	4193 Neptune Road, Saint Cloud, FL 34769

Executed by the undersigned at Orlando, Orange County, Florida, on the 16th day of February, 2011.

LOVERN & URICH, LLC

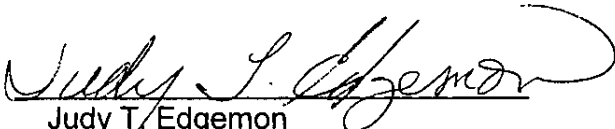
By:



William H. Roberts
Authorized Representative

SMITH & OLIVER, LLC

By:



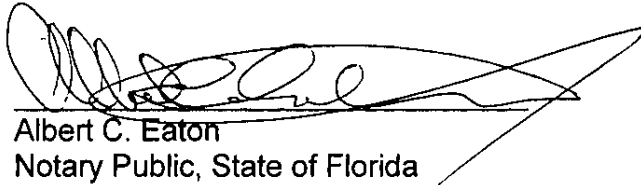
Judy T. Edgemon
Authorized Representative

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STATE OF FLORIDA
COUNTY OF ORANGE

I HEREBY CERTIFY that on this day before me, an officer duly authorized to take acknowledgments and oaths, personally appeared WILLIAM H. ROBERTS, who is personally known to me or who has produced Personally Known as identification, who did not take an oath, who executed the foregoing and acknowledged before me that he executed the same freely and voluntarily for the purposes therein expressed.

16TH WITNESS MY HAND and official seal in the County and State aforesaid, this day of February, 2011.


Albert C. Eaton
Notary Public, State of Florida

My Commission Expires:

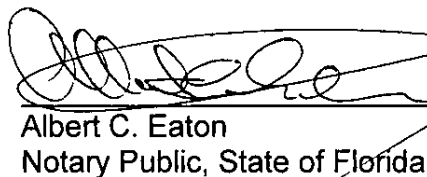


ALBERT C. EATON
MY COMMISSION # DD 705951
EXPIRES: December 11, 2011
Bonded Thru Budget Notary Services

STATE OF FLORIDA
COUNTY OF ORANGE

I HEREBY CERTIFY that on this day before me, an officer duly authorized to take acknowledgments and oaths, personally appeared JUDY T. EDMON, who is personally known to me or who has produced Personally Known as identification, who did not take an oath, who executed the foregoing and acknowledged before me that she executed the same freely and voluntarily for the purposes therein expressed.

16TH WITNESS MY HAND and official seal in the County and State aforesaid, this day of February, 2011.


Albert C. Eaton
Notary Public, State of Florida

My Commission Expires:



ALBERT C. EATON
MY COMMISSION # DD 705951
EXPIRES: December 11, 2011
Bonded Thru Budget Notary Services

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SECRETARY OF STATE

**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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

ROSE DISTRIBUTORS, LLC

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

SONYA E. SMITH
4103 Neptune Road
Saint Cloud, FL 34769

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 as provided for in Chapter 608, Florida Statutes.


SONYA E. SMITH

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TALLAHASSEE, FLORIDA