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| Special Instructions to Filing Officer: | | | | |
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DIVISION OF CORPORATIONS
TALL AHASSEE, FLORIDA

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SECRETARY OF STATE DIVISION OF CORPORATIONS

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| CORP. NAME: | DOGWOOI | INVESTMENT COUNSEL, LL | <u>C</u> | | | | |
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| () ANNUAL REPORT | | () TRADEMARK/SERVICE MARK | () FICTITIOUS NAME | | | | |
| () FOREIGN QUALIFICATION | | () LIMITED PARTNERSHIP | (XX) LIMITED LIABILITY | | | | |
| () REINSTATEMENT | | () MERGER | () WITHDRAWAL | | | | |
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| () CERTIFICATE O | F STATUS | | | | | | |

Examiner's Initials

ARTICLES OF ORGANIZATION

DOGWOOD INVESTMENT COUNSEL, LLC, a Florida limited liability company

ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

DOGWOOD INVESTMENT COUNSEL, LLC

ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

172 Herons Nest Lane St. Augustine, Florida 32080

ARTICLE III . INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability, Company and its initial registered agent shall be:

Michael S. Taaffe 240 South Pineapple Avenue, 10th Floor Sarasota, Florida 34236

ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations of the Limited Liability Company.

SLK_SAR: #86929v1

| IN WITNESS WHEREON | these Articles of Organization have been executed as of the 2011. |
|--------------------|---|
| WITNESSES: | |
| Print Name | Blair Schrum |
| Print Name | · |
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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the 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:

DOGWOOD INVESTMENT COUNSEL, LLC

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

Michael S. Taaffe 240 South Pineapple Avenue, 10th Floor Sarasota, Florida 34236

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date:

Michael S. Taaffe

"REGISTERED AGENT"