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Account Name ; BAND WEINTRAUB, P.L.

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Phone

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#### FLORIDA LIMITED LIABILITY CO. LEHIGH ASSOCIATES, LLC

Certificate of Status Certified Copy 1 04 Page Count Estimated Charge \$155.00

> J. SAULSBERRY EXAMINER

AUG 11 2011

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#### ARTICLES OF ORGANIZATION

# LEHIGH ASSOCIATES, 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:

#### LEHIGH ASSOCIATES, LLC

# ARTICLE II PRINCIPAL OFFICE

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

1991 Main Street, Box 183 Sarasota, FL 34236

## ARTICLE III INITIAL REGISTERED AGENT/OFFICE

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

Carolynn Garcia c/o Executive Property Management 1991 Main Street, Box 183 Sarasota, FL 34236

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# 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 or Operating Agreement of the Limited Liability Company.

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the 10<sup>th</sup> day of August, 2011.

CAROL NN GARCIA
"Authorized Representative"

SECRETARY OF STATE

Aug. 10. 2011 2:42PM

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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 registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

#### LEHIGH ASSOCIATES, LLC

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

Carolynn Garcia c/o Executive Property Management 1991 Main Street, Box 183 Sarasota, FL 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.

CAROLYNNIGARCIA
"REGISTERED AGENT"