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L. SELLERS

AUG 25 2011

EXAMINER

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Fax Number : (850) 617-6383

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Account Name : MCFARLAND, GOULD, LYONS, SULLIVAN & HOGAN, P.A.
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**FLORIDA LIMITED LIABILITY CO.
TALL PINES VENTURES, LLC**

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**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY
OF**

TALL PINES VENTURES, LLC

ARTICLE I: NAME AND MAILING ADDRESS


The name of the Limited Liability Company is **TALL PINES VENTURES, LLC**, and its principal office and mailing address is 1418 Circle Drive, Tarpon Springs, Florida 34689.

**ARTICLE II: REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT'S SIGNATURE**

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

Gary W. Lyons, Esquire
311 South Missouri Avenue
Clearwater, Florida 33756

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, F.S.


GARY W. LYONS, Registered Agent

ARTICLE III - MANAGEMENT

This Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed Company. The initial Manager shall be Martha S. Keys, 1418 Circle Drive, Tarpon Springs, Florida 34689.

Prepared By:
McFarland, Gould, Lyons,
Sullivan & Hogan, P.A.
Gary W. Lyons, Esq.
FBN: 0268186
311 S. Missouri Avenue
Clearwater, FL 33756
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In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, the undersigned have executed these Articles of Organization for Florida Limited Liability Company this 24th day of August, 2011.


MARTHA S. KEYS
Titled: Authorized Representative of Member

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