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(FAX)

P.001/005

Division of Corporations

Page 1 of 1

Florida Department of State
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**FLORIDA LIMITED LIABILITY CO.
Capricorn Southeast, LLC**

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Articles of Organization of
CAPRICORN SOUTHEAST, LLC

a Florida Limited Liability Company

The undersigned, **MICHAEL M. HAMRICK**, desires to form a limited liability company pursuant to the Florida Limited Liability Company Act. As an authorized representative of a member of the proposed limited liability company, he does hereby make and file these Articles of Organization, and hereby declares and affirms:

ARTICLE I:

Name

The name of the limited liability company ("Company") is **CAPRICORN SOUTHEAST, LLC**, a Florida Limited Liability Company.

ARTICLE II:

Duration

The period of duration for the Company is perpetual, beginning on the date these Articles of Organization are filed by the Florida Department of State.

ARTICLE III:

Street Address and Mailing Address

The street address of the Company's principal office is 601 - 12th Street West, Bradenton, Florida. The mailing address of the Company's principal office is 601 - 12th Street West, Bradenton, FL 34205.

ARTICLE IV:

Registered Agent and Office

The name of the Company's initial registered agent for service of process in the State of Florida is **MICHAEL M. HAMRICK**. His street/mailling address is 601 - 12th Street West, Bradenton, FL 34205.

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**ARTICLE V:
Admission of New Members**

The Company has the right to admit new members. Additional members may be admitted only on the unanimous written consent of the existing member(s), and the existing member(s) shall determine the amount and nature of contributions by new members at the time the new members are admitted.

**ARTICLE VI:
Continuation Provisions**

The remaining members of the Company have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event that terminates the continued membership of a member in the Company. The business may be continued only on the unanimous written consent of the remaining members.

**ARTICLE VII:
Additional Provisions**

The power to adopt, alter, amend, or repeal the regulations of the Company is vested entirely in the members of the Company.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a member of the proposed limited liability company, does certify that he is of full age, is competent to contract and is a citizen of the United States of America. For the purpose of forming the proposed limited liability company above-named to do business both within and without the State of Florida, and in pursuance of the Florida Limited Liability Company Act, I do make and file these Articles of Organization, hereby declaring and certifying that the matters above stated are true, and accordingly I have hereunto set my hand and seal this 14th day of September, 2011.



MICHAEL M. HAMRICK (SEAL)

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STATE OF FLORIDA
COUNTY OF MANATEE

The foregoing instrument was acknowledged before me this 14th day of September, 2011, by **MICHAEL M. HAMRICK**, who is personally known to me; or produced _____ (type of identification produced) as identification.

(Affix Notary Seal)

Signature:

Kelly Jo Mrozka
NOTARY PUBLIC, State of Florida at Large

Typed name: _____

My Commission Expires: _____

My Commission No.: _____



KELLY JO MROZKA
MY COMMISSION # DD 884548
EXPIRES: March 8, 2014
Bonded Thru Budget Notary Service

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the Florida limited liability company is **CAPRICORN SOUTHEAST, LLC.**
2. The name and street/mailling address of the registered agent and office is:

Michael M. Hamrick
601 - 12th Street West
Bradenton, FL 34205

Having been named as registered agent and to accept service of process for the above-named 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.

DATED this 14th day of September, 2011.


Michael M. Hamrick, Registered Agent

STATE OF FLORIDA
COUNTY OF MANATEE

The foregoing instrument was acknowledged before me this 14th day of September, 2011, by **MICHAEL M. HAMRICK**, who is personally known to me or produced _____
(type of identification produced) as identification.

Affix Notary Seal)



KELLY JO MROZKA
MY COMMISSION # DO 984548
EXPIRES: March 9, 2014
Bonded Thru Budget Notary Services

Signature


NOTARY PUBLIC, State of Florida at Large

Typed name: _____

My Commission Expires: _____

My Commission No.: _____

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