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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FISHER, BUTTS, SECHREST & WARNER, P.A.

Account Number: 120020000102 Phone: (352)373-5922

Fax Number : (352)373-5921

\*\*Enter the omail address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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# FLORIDA LIMITED LIABILITY CO.

Lauroak, LLC

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# <u>ARTICLES OF ORGANIZATION</u>

OF

# LAUROAK, LLC



The name of the Company is LAUROAK, LLC.

## ARTICLE II. PERIOD OF DURATION.

The Company's period of duration is perpetual.

## ARTICLE III. PURPOSE OF ORGANIZATION.

The purpose of organizing the Company is to engage in any and all business permitted under the laws of the State of Florida.

#### ARTICLE IV. ADDRESS OF PRINCIPAL OFFICE.

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

21 Seminole Drive Collinsville, Virginia 24078.

P. O. Box 231 Collinsville, Virginia 24078-0231

## ARTICLE V. REGISTERED AGENT AND INITIAL REGISTERED OFFICE.

The name and address of the Registered Agent of this Company is:

Robert P. Butts, Esq. FISHER, BUTTS, SECHREST & WARNER, P.A. 5200 S.W. 91st Terrace, Suite 101 Gainesville, FL 32608

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The Members may, at their discretion, move the Registered Office to any other address in the State of Florida.

#### ARTICLE VI. MEMBERS/MANAGING MEMBERS.

The following are the initial Members/Managing Members:

Frances Lipford Gale P. O. Box 231 Collinsville, Virginia 24078-0231

Patricia Lipford Abbitt 8927 S.W. 42<sup>nd</sup> Place Gainesville, Florida 32608

## ARTICLE VII. MEMBERSHIP UNITS.

The maximum number of membership units that this Company is authorized to issue and have outstanding at any one time is 100 units.

#### ARTICLE VIII. INDEMNIFICATION.

The Company agrees to indemnify any Member, or any former Member, to the full extent permitted by law.

Patricia Lipford Abbitt, as authorized agent

3523735921 >> 850-617-6381

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STATE OF FLORIDA COUNTY OF <u>ALACHUA</u>	
	acknowledged before me this 21st day of Normbus is personally known to me or who produced as identification.
	CRUP AHS
	NOTARY PUBLIC Typed or printed name: Robert P. Butter
PIOSERT P. BUTTS  MY COMMISSION 6 EE 051412  EXPIRES: Jenuary 30, 2015  Fanded Thru Notary Public Underwriters	Commission number:  Commission expires:

3523735921 >>

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# ACCEPTANCE OF REGISTERED AGENT

# <u>FOR</u>

# LAUROAK, LLC

HAVING BEEN NAMED as Registered Agent to accept Service of Process for LAUROAK, LLC, at the place designated in this document, I hereby agree to act in such capacity; further, I AGREE TO COMPLY with the provisions of all Statutes relative to the proper and complete performance of my duties as Registered Agent.

Robert P. Butts, Registered Agent

FISHER, BUTTS, SECHREST, WARNER & PALMER, P.A.

5200 S.W. 91st Terrace, Suite 101

Gainesville, FL 32608