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(Re	questor's Name)	
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CORPORATI

ION SERVICE COMPANY
ACCOUNT NO. : 12000000195
REFERENCE: 111163 5012293
AUTHORIZATION :
COST LIMIT : (\$ 125.00
ORDER DATE : February 28, 2012
ORDER TIME : 2:22 PM
ORDER NO. : 111163-005
CUSTOMER NO: 5012293
DOMESTIC FILING
NAME: PENNEKAMP MANAGEMENT, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Troy Todd - EXT. 2940
EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		•
The name of the Limited Liability Comp	pany is:	
Pennekamp Management, LLC	• •	
(Must end with the words "Limi	ted Liability Company, "L.L.C.," or "I.L.C.")	
ARTICLE II - Address:	·	
The mailing address and street address o	f the principal office of the Limited Liab	ility Company is:
Principal Office Address:	Mailing Address:	
780 5th Avenue	780 5th Avenue	
Naples, FL 34102	Naples, FL 34102	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	wn Registered Agent. You must designate an individua	al or another
Corporation Service (Company Name	EB 28 RETARN AHASS
1201 Hays Street	· · · · · · · · · · · · · · · · · · ·	
Florida s	treet address (P.O. Box NOT acceptable)	10.7 11.5 15.0 15.0 15.0 15.0 15.0 15.0 15.0
Tallahassee	FI, 32301	9: 49 S.J.A.T.E. L.ORIOZ
	City, State, and Zip	

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.

Corporation Service Company

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

MGR <u>I</u>	James J. Dolan 260 Bay Road Naples, FL 34102 Doug Hein 90 Beta Drive Pittsburgh, PA 15238
MGR I Use attachment if necessary) LE V: Effective date, if other than the date of fective date is listed, the date must be spec	260 Bay Road Naples, FL 34102 Doug Hein 90 Beta Drive
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REQUIRED SIGNATURE:	101 AN 7
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	h authorized representative of a member.
Signature of member or an	hartharized consecutative of a member
(In accordance with section 608.408(3)	a authorized representative of a member.
	(); Florida Statutes, the execution of this document
constitutes an affirmation under the pe	i); Florida Statutes, the execution of this document is enalties of perjury that the facts stated herein are in
constitutes an affirmation under the pe), Florida Statutes, the execution of this document contains the enalties of perjury that the facts stated herein are true, submitted in a document to the Department of State.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)