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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800)494-3124  
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**\*\*Enter the email 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.  
4EVERFAMILY LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

A. LUNT

JUL 25 2011

EXAMINER

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

4EVERFAMILY LLC

**ARTICLE II ADDRESS**

The principal office of the Limited Liability Company is:

15309 NW 132ND TERRACE  
ALACHUA, FLORIDA 32615

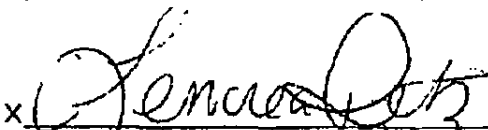
The mailing address of the Limited Liability Company is:

PO BOX 2638  
ALACHUA, FLORIDA 32616-2368**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

LE'NOREA RENTZ  
15309 NW 132ND TERRACE  
ALACHUA, FLORIDA 32615

Having been named as registered agent 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.

x 

LE'NOREA RENTZ / Registered Agent's signature

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TALLAHASSEE, FLORIDA

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**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS**

MANAGING MEMBER

LE'NOREA RENTZ

PO BOX 2638

ALACHUA, FLORIDA 32616-2368

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.....  
x 

Signature of a member or an authorized representative of a member (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.

LE'NOREA RENTZ

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