

L12000121638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

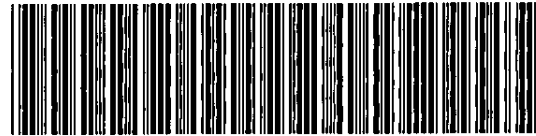
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. CLINE

SEP 24 2012

EXAMINER

**CORPORATE
ACCESS,
INC.**

"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

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9/21/12

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LLC

1. South Picc, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

21W SEP 21 PM 9:42
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

SPECIAL INSTRUCTIONS:

**ARTICLES OF ORGANIZATION
OF
SouthPICC, LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I — Name:

The name of the limited liability company (hereinafter referred to as the "Company") is "SouthPICC, LLC."

ARTICLE II — Address:

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

Mailing Address 1660 Summerhouse Lane, #804
Sarasota, FL 34242

Street Address: 1660 Summerhouse Lane, #804
Sarasota, FL 34242

ARTICLE III — Registered Agent and Registered Office

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

Douglas L. Johns
1660 Summerhouse Lane, #804
Sarasota, FL 34242


ARTICLE IV — Initial Member Manager

The initial member manager is: Tiffany Kimble

ARTICLE V — Limitation on Agency Authority of Members:

Pursuant to Section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 19th day of September, 2012.



Signature of authorized representative
TIFFANY KIMBLE

Typed or printed name of signee

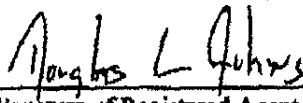
(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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CLERK OF DISTRICT COURT
SARASOTA COUNTY, FLORIDA

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)



Signature of Registered Agent
DOUGLAS L. JOHNS

Typed or printed name of signer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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