### Florida Department of State

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#### FLORIDA LIMITED LIABILITY CO. LZ Horne Management, LLC

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10/29/2012

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# ARTICLES OF ORGANIZATION OF LZ HORNE MANAGEMENT, LLC

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida, sets forth the following:

#### **ARTICLE I - NAME**

The name of this limited liability company is LZ Horne Management, LLC (the "Company").

#### ARTICLE II - PERIOD OF DURATION

The period of duration of the Company shall be perpetual from the date of filing these Articles with the Department of State unless otherwise dissolved pursuant to provisions of the Florida Limited Liability Company Act.

## ARTICLE III - MAILING AND STREET ADDRESS OF INITIAL PRINCIPAL OFFICE OF COMPANY

The mailing and street address for the principal office of the Company is 1154 Forest Shore Drive, Miramar Beach, FL 32550.

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#### ARTICLE IV - INITIAL REGISTERED AGENT

The name and street address of the registered agent in Florida for the Company is:

Lawerence Scott Horne, DMD 1154 Forest Shore Drive Miramar Beach, FL 32550

#### ARTICLE V- MANAGEMENT

The Company is to be managed by its manager(s), and is therefore a manager-managed limited liability company. The initial managers of the company are Lawerence Scott Horne and Zabrina Serrano Horne.

#### **ARTICLE VI - ADDITIONAL MEMBERS**

An interest of a Member of the Company may only be transferred or assigned to such extent as is provided in the Operating Agreement.

#### ARTICLE VII - AUTHORIZED REPRESENTATIVE

The name and address of the authorized representative for purposes of executing these Articles of Organization is Lawerence Scott Horne, DMD, 1154 Forest Shore Drive, Miramar Beach, FL 32550.

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IN WITNESS WHEREOF, the undersigned has executed these Articles on October 23, 2012, as the authorized representative for the Member(s) of the Company.

By:

Lawerence Scott Horne, DMD, Authorized

Representative

#### ACCEPTANCE BY THE REGISTERED AGENT

I, Lawerence Scott Horne, DMD, hereby accept appointment as Registered Agent for the Limited Liability Company, LZ HORNE MANAGEMENT, LLC, and do hereby understand and accept the obligation of the position, and acknowledge my acceptance with my signature below.

Date: October 29, 2012

Lawerence Scott Horne, DMD, Registered Agent

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