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FLORIDA LIMITED LIABILITY CO.  
Reeves Road LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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G. McLEOD

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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:

REEVES ROAD LLC

**ARTICLE II ADDRESS**

The principal office of the Limited Liability Company is:

2752 JASON STREET

TAMPA, FLORIDA 33619

The mailing address of the Limited Liability Company is:

PO BOX 89188

TAMPA, FLORIDA 33689

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

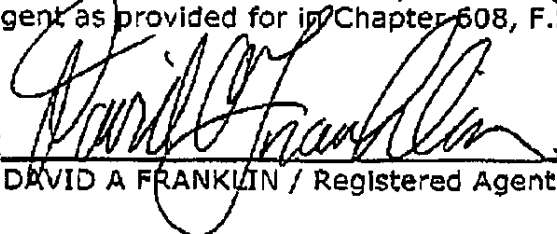
DAVID A FRANKLIN

2752 JASON STREET

TAMPA, FLORIDA 33619

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

  
DAVID A FRANKLIN / Registered Agent's signature

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PAGE 2 REEVES ROAD LLC

**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

DAVID A FRANKLIN

PO BOX 89188

TAMPA, FLORIDA 33689

.....

X  2/20/13

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.

DAVID A FRANKLIN

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