Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000048229 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (650)617-6383

From:

Account Name : MCCARTHY, SUMMERS, BOBKO, WOOD, NORMAN, BASS & MELBY,

Account Number: 119990000170

Phone : (772)286-1700

Fax Number

: (772)283-1803

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

kim@McCarthySummers.com

FLORIDA LIMITED LIABILITY CO. KMY OF STUART, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

4 2013

T CLINE

Electronic Filing Menu

Corporate Filing Menu

Help

Integrity Dedication Solutions

MCCARTHY
SUMMERS
BOBKO
WOOD
NORMAN
BASS
G-TAYLOR PA

March 1, 2013

H13000048229

Florida Department of State
Division of Corporations
The Capitol
P.O. Box 6327
Tallahassee, Florida 32399-0250

RE: Articles of Organization of KMY of Stuart, LLC

Ladies and Gentlemen:

With reference to the above company, enclosed please find Articles of Organization for filing. Kindly fax to the undersigned proof of filing same. Thank you.

Very truly yours,

Karen L.McGhee, CP, FRP

Certified Paralegal

Email: klm@McCarthySummers.com

/klm Enclosure Terence P. McCerthy*
Robert P. Summers*
Noel A. Bobko
Steven J. Wood **
Kenneth A. Norman

Kathryn C. Bass Patricia I. Taylor

Margaret E. Wood

Real Estate Lawyer
*Board Critified Wills,
Trusts & Estates Lawyer

Certified Circuit
Civil Mediator

H13000048229

H13000048229

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KMY OF STUART, LLC

ARTICLE II - Duration:

The effective date of this company shall be March 1, 2013.

The period of duration for the Limited Liability Company shall:

Continue until December 31, 2063, unless sooner terminated by operation of law or in accordance with the Regulations of the Limited Liability Company, or as reestablished after such primary term for such additional period as is determined by the Members.

ARTICLE III - Address:

The mailing address of the principal office of the Limited Liability Company is:

300 Ocean Trail Way, Unit 905, Jupiter, FL 33477

The street address of the principal office of the Limited Liability Company is:

300 Ocean Trail Way, Unit 905, Jupiter, FL 33477

ARTICLE IV - Registered Agent/Address

The name and address of the registered agent is:

Kenneth A. Norman 2400 SE Federal Highway, Fourth Floor Stuart, FL 34994 2013 MAR - 1 MM C# 38
SEGRETARY OF STATE
TALLAHASSEE, FLORIOA

H13000048229

H13000048229

ARTICLE V - Additional Members

Additional Members may be admitted to the Limited Liability Company upon the unanimous vote of the Limited Liability Company's members.

ARTICLE VI - Continuation of Business

Upon the withdrawal of a Member, the remaining members owning at least sixty-six and two-thirds percent (66 2/3rd%) of the interests in the Limited Liability Company then owned by all remaining Members (by written consent of each of such Members) may elect to continue the business.

ARTICLE VII - Management:

The Limited Liability Company is to be managed by a Manager and is therefore a manager-managed company. The name and address of the initial Manager is:

Michael J. Yomazzo 300 Ocean Trail Way, Unit 905 Jupiter, FL 33477

Dated: March 1, 2013.

Kenneth A. Norman, Authorized Representative

H13000048229

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: KMY OF STUART, LLC
- 2. The name and address of the registered agent and office is:

____Kenneth A. Norman_____(Name)

2400 SE Federal Highway, Fourth Floor (P.O. Box not acceptable)

Stuart, FL 34994 (City/State/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, Kenneth A. Norman hereby accepts the appointment as registered agent and agrees to act in this capacity. Kenneth A. Norman further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and it is familiar with and accepts the obligations of its position as registered agent.

Dated: March 1, 2013.

XION HALL

Kendeth A. Norman

H13000048229

Articles of Organization KMY OF STUART, LLC

Page 3