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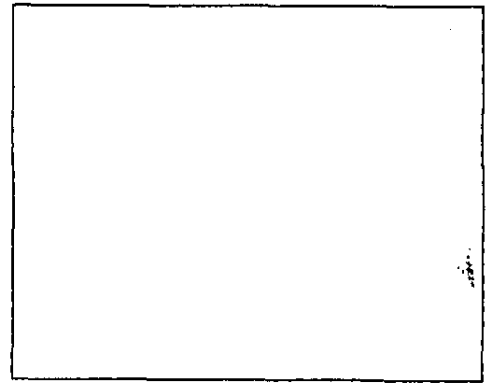
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EXAMINER

JUL -9 2013

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ENTITY NAME:

TAYLORCANES GP, LLC

CK# , 6010 FOR \$ 160.00

PLEASE FILE THE ATTACHED ARTICLES & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

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XXX CERTIFICATE OF STATUS

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Examiner's Initials

ARTICLES OF ORGANIZATION OF
TAYLORCANES GP, LLC

ARTICLE I
NAME

The name of this Limited Liability Company shall be TAYLORCANES GP, LLC (the "Company").

ARTICLE II
PRINCIPAL PLACE OF BUSINESS

The principal place of business of the Company shall be 279 Veleros Ct., Coral Gables, FL 33143 and such other place or places as the members from time to time may determine. The mailing address of the Company is 279 Veleros Ct., Coral Gables, FL 33143.

ARTICLE III
INITIAL REGISTERED OFFICE AND
REGISTERED AGENT

The initial registered agent of the Company shall be Atrium Registered Agents, Inc. The address of the initial registered agent is 1500 San Remo Avenue, Suite 125, Coral Gables, Florida 33146.

ARTICLE IV
MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager – managed company. The names and addresses of the managers who will serve as managers until the first annual meeting of member or until their successors are selected and qualified in accordance with the Operating Agreement or applicable law are:

Jeffrey C. Taylor
279 Veleros Ct.
Coral Gables, FL 33143

Jaclyn Taylor
279 Veleros Ct.
Coral Gables, FL 33143

IN WITNESS WHEREOF, the undersigned has caused these Articles of Organization to be executed on the 3rd day of July, 2013, effective upon filing same with the Florida Department of State.

TAYLORCANES GP, LLC

BY:

Robert A. Stamen
ROBERT A. STAMEN, Authorized Representative

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FLORIDA DEPARTMENT OF STATE

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT DESIGNATING ITS REGISTERED OFFICE AND REGISTERED AGENT IN FLORIDA.

1. The name of the limited liability company is:

TAYLORCANES GP, LLC

2. The name and address of the registered agent and office is:

Atrium Registered Agents, Inc.
1500 San Remo Avenue, Suite 125
Coral Gables, Florida 33146

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, 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..

ATRIUM REGISTERED AGENTS, INC.

By: Robert A. Stamen
Robert A. Stamen, Vice President

Date: July 3, 2013

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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