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To:

Division of Corporations

Fax Number

: (850)617-6303

From:

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

Account Number : I19990000170 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:

klm@McCarthySummers.com

FLORIDA LIMITED LIABILITY CO. Triple Crown of Stuart, LLC

| Certificate of Status | | | | # 134 I | 0 | |
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| Certified Copy | , | | ' ' | : | 1 | |
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TRIPLE CROWN OF STUART, LLC

ARTICLE II - Duration:

The effective date of this company shall be August 26, 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:

2400 SE Federal Highway, 4th FL, Stuart, FL 34994

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

2400 SE Federal Highway, 4th FL, Stuart, FL 34994

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 SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

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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 managermanaged company. The name and address of the initial Manager is:

> Deanna O'Bryan 4437 Savage Drive Louisville, KY 40216

Dated: August 26, 2013.

Kenneth A. Norman, Authorized Representative

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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. 2. | The name of the limited liability company is: TRIPLE CROWN OF STUART. The name and address of the registered agent and office is: | NS(TC | 2913 | |
|----------|--|----------------|----------|-----|
| | Kenneth A. Norman(Name) | AHASS AHASS | AUG 26 | FIL |
| | 2400 SE Federal Highway, Fourth Floor (P.O. Box not acceptable) | OF ST | ₩ | ED |
| | Stuart_FL 34994 (City/State/Zip) | ORIDA ORIDA | 38 | |

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: August 26, 2013.

REGISTERED AGENT:

Kennéth A. Norman