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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LYONS & LYONS, P.A.

Account Number : I20030000061 Phone : (239)948-1823 Fax Number : (239)948-1826

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

Email Address: jgardner@lyons-law.com

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FLORIDA LIMITED LIABILITY CO.

MyIprt, LLC

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ARTICLES OF ORGANIZATION

OF

MYIPRT, LLC

The undersigned, under the provisions of Chapter 605 of the Florida Statutes (the "Act"), for the purpose of forming a limited liability company under the laws of the State of Florida, do set forth the following:

1. Name.

The name of the limited liability company is MyIprt, LLC, (hereinafter referred to as the "Company").

2. Address.

Principal Office Address:

8870 Tamiami Trail North Naples, FL 34108

Mailing Address

8870 Tamiami Trail North Naples, FL 34108

3. Registered Agent.

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

L&L Para, Ltd. Co. 27911 Crown Lake Blvd. Suite 209 Bonita Springs, FL 34135

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 605, F.S.

L&L Para, Ltd. Co., a

Florida limited liability company

Richard D. Lyons

Its: Manager

ARTICLES OF ORGANIZATION OF MYIPRT, LLC

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4. Management.

The overall management and control of the business and affairs of the Company shall be vested in a manager and the initial manager shall be:

Title: Name and Address:

MGR Pamela P. Hunter

8870 Tamiami Trail North

Naples, FL 34108

IN WITNESS WHEREOF, I, Jason D. Gardner, have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 21st day of March, 2014.

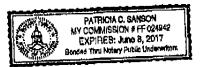
Jason D. Gardner

The Authorized Representative of a Member

STATE OF FLORIDA COUNTY OF LEE

The foregoing instrument was acknowledged before me on the 21st day of March, 2014, by Jason D. Gardner, as the Authorized Representative of a Member, who (*) is personally known to me or () produced ______ as identification.

(Seal)



Notary Public

4824-6205-1609, v. I

ARTICLES OF ORGANIZATION OF MYIPRT, LLC