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ACCOUNT NO. : I2000000195 REFERENCE: 135731 4311863 AUTHORIZATION : COST LIMIT : ORDER DATE: May 16, 2014 ORDER TIME: 11:59 AM ORDER NO. : 135731-045 CUSTOMER NO: 4311863 DOMESTIC FILING NAME: 600 FRANCES STREET LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP __ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY __ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Emily Gray - EXT. 62925 EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

600 Frances Street LLC		
(Must end with the wor	ds "Limited Liability Company, "L.L.C.," or "LLC."))
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:	:
Principal Office Address:	Mailing Address:	
19653 Indian Mount Road	c/o Rowland M.Smith III	
Sugarloaf Key, FL 33042	ParenteBeard LLC	
	1800 Byberry Road, Huntingdon V	/alley, PA 19006
		individual forc.
Jeffrey Asplundh	-	
	Name	-n": 5€
19653 Indian Moun	nt Road	\$ 20 P
Florida street address	s (P.O. Box <u>NOT</u> acceptable)	
Sugarloaf Key	FL 33042	
City	/ 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, 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..

Registered Agent's Signature (REQUIRED)

Jeffrey Asplundh

ARTICLE I - Name:

The name of the Limited Liability Company is:

(CONTINUED)

Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	,	
MGR	Jeffrey Asplundh	
	19653 Indian Mount Road	1
	Sugarloaf Key, FL 33042	، بھر ۱۰ ۱ - ا
MGR	Wendy Asplundh	٠٠٠ يولو
	19653 Indian Mount Road	
	Sugarloaf Key, FL 33042	2/10
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EV: Effective date, if other than the date ctive date is listed, the date must be spe	of filing: (OPTI cific and cannot be more than five business days	
E V: Effective date, if other than the date ctive date is listed, the date must be spe f filing.) E VI: Other provisions, if any.		
E V: Effective date, if other than the date octive date is listed, the date must be spending.) E VI: Other provisions, if any. EFOURED SIGNATURE: Signsturable mer (In accordance with section 6 constitutes an affirmation un	nber op a authorized representative of a memios. 05.0203 (1) (b). Florida Statutes, the execution of der the penalties of perjury that the facts stated here	prior to or 90 de
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EV: Effective date, if other than the date ctive date is listed, the date must be spet filing.) EVI: Other provisions, if any. EFOURED SIGNATURE: Signature his mer (in accordance with section 6 constitutes an affirmation un I am aware that any false inf constitutes a third degree fel	nber of an authorized representative of a ment 05.0203 (1) (b). Florida Statutes, the execution of der the penalties of perjury that the facts stated he compation submitted in a document to the Department	ber. This document rein are true.

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