

9/16/2014

September 16, 2014

10:11 AM

Gray Robinson

Division of Corporations

No. 76

P. 1

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Florida Department of State
Division of Corporations
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FLORIDA LIMITED LIABILITY CO.
Liberty VP Clearwater GP, LLC

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I
Name

The name of this Limited Liability Company is:

Liberty VP Clearwater GP, LLC

ARTICLE II
Address

The initial mailing address and street address of the principal office of this Limited Liability Company is:

2200 Lucien Way
Suite 410
Maitland, Florida 32751

ARTICLE III
Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

ARTICLE IV
Initial Board of Managers

This Limited Liability Company shall have one (1) manager initially. The number of managers may be either increased or decreased from time to time in accordance with the Operating Agreement of this Limited Liability Company, but shall never be less than one.

The name and address of the initial manager of this Limited Liability Company is as follows:

<u>Name</u>	<u>Street Address</u>
Wm. Michael Mikkelsen	2200 Lucien Way, Suite 410 Maitland, Florida 32751

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ARTICLE V

Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the initial Registered Agent of this Limited Liability Company is:

Wm. Michael Mikkelson
2200 Lucien Way
Suite 410
Maitland, Florida 32751

Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, I hereby accept this appointment and agree to serve this Limited Liability Company in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performs 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


AUTHORIZED REPRESENTATIVE'S SIGNATURE

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(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.)

WM. MICHAEL MIKKELSON, AUTHORIZED REPRESENTATIVE

Type or printed name of signee

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