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Division of Corporations

Fax Number : (850) 617-6383

From: GAIL S ANDRE

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036 : (407)843-4600 : (407)843-4444 Fax Number

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PLEASE ARRANGE FILING OF THE ATTACHED ARTICLES OF ORGANIZATION AND RETURN A CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU.

FLORIDA LIMITED LIABILITY CO. SAM OF SNB, LLC

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ARTICLES OF ORGANIZATION OF SAM OF NSB, LLC

ARTICLE I - NAME

The name of this limited liability company is SAM OF NSB, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 2420 S. Lakemont Ave., Ste 450, Orlando, Florida 32814.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 2420 S. Lakemont Avc., Ste 450, Orlando, Florida 32814 and the name of the initial registered agent of the Company at that address is Stephen W. Orosz.

ARTICLE IV - MANAGEMENT

The Company will be managed by one or more members and is, therefore, a member-managed limited liability company.

Stephen W. Orosz, Member or Authorized Representative of a Member

ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.

Stephen W. Orosz