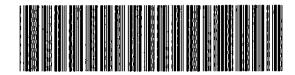
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DATE: 11/18/14

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TYPE OF FILING: ARTICLES

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COVER LETTER

10:	: Registration Section Division of Corporations	
SUBJE	BJECT: THE ROCKBRIDGE GROUP FLORIDA, LLC	
	Name of Limited Liability Company	
The enc	e enclosed Articles of Organization and fee(s) are submitted for filing.	
Please n	ase return all correspondence concerning this matter to the following:	
	Name of Person	
	Capitol Services - Corporate Filings Team	
	Firm/Company	
	800 Brazos Ste 400	· · · · · · · · · · · · · · · · · · ·
	Atturess	
	Austin TX 78701 City/State and Zip Code	
	greg.tolander@therockbridgegroup.com E-mail address: (to be used for future annual report not	ification)
For furth	further information concerning this matter, please call:	
	at (800) 345-4647	· · · · · · · · · · · · · · · · · · ·
	Name of Person Area Code Daytime Telephone	Number
Enclosed	closed is a check for the following amount:	
\$125.00	Certificate of Status Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy Iditional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Corporations Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
THE ROCKBRIDGE GROUP FLORIDA, LI			
(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:		
Principal Office Address: Mail	ing Address:		
13640 Briarwick Dr., Suite 120	13640 Briarwick Dr., Suite 120		
Austin, Texas 78729	Austin, Texas 78729		
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration. The name and the Florida street address of the registered Capitol Corporate Name 155 Office Pla	n Registered Agent. You must designate an individual.) d agent are: e Services, Inc.	NOV 18 PH LA	
Florida street address (P.O. Box		25 25	
Tallahassee	FL 32301	>	
City	Zip		
Having been named as registered agent and to accept se the place designated in this certificate, I hereby accep capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ob Chap	pt the appointment as registered agent and agree to of all statutes relating to the proper and complete bligations of my position as registered agent as pro oter 605, F.S	o act in this performance wided for in	
Infa Au	Krista Ali, Asst. 5 of Capitol Corporate		
Registered Agent's Signs	ature (REQUIRED)		

(CONTINUED)

Page 1 of 2

"AMBR" = Authorized Member Title: "MGR" = Manager	Name and Address:
<u>Title:</u> "MGR" = Manager MGR	Greg Tolander
MOU	
•	13640 Briarwick Dr., Suite 120
	Austin, Texas 78729
MGR	John H. Miller
	13640 Briarwick Dr., Suite 120
	Austin, Texas 78729
	Austin, Texas 76729
	ATE O
	and the second s
(Use attachment if necessary)	
(ore dimension is necessary)	-
RTICLE V: Effective date, if other than the date is listed, the date must be edate of filing.)	specific and cannot be more than five business days prior to or 90 days after
RTICLE VI: Other provisions, if any.	
	1
REQUIRED SIGNATURE:	<u> </u>
REQUIRED SIGNATURE:	nes Tolanke
Signature of a signature of a signature of a signature of a signature with section constitutes an affirmation I am aware that any false	member or an authorized representative of a member. 20605.0203 (1) (b), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. 2 information submitted in a document to the Department of State are felony as provided for in s.817.155, F.S.)
Signature of a signat	member or an authorized representative of a member. 55 605.0203 (1) (b), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. It information submitted in a document to the Department of State

Filing Fccs;
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)