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#### ARTICLES OF ORGANIZATION

#### FOR

#### SILVER OAKS HOLDING II, LLC

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

#### ARTICLE I — NAME:

The name of the Limited Liability Company shall be: Silver Oaks Holding II, LLC (the "Company").

#### ARTICLE II — ADDRESS:

The mailing address and street address of the principal office of the Company shall be as follows:

337 Bahia Vista Drive Indian Rocks Beach, FL 33785

#### ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICE:

The address of the initial registered office of the Company in the State of Florida is \$\frac{1}{2}1\$ North Collins Street, Plant City, Florida 33563, and the name of the registered agent at such address is Keith C. Smith, Esquire.

#### **ARTICLE IV – MANAGEMENT:**

The Company shall be managed by one or more Managers. The name and address of the initial Manager is:

Harold J. Myers 337 Bahia Vista Drive Indian Rocks Beach, FL 33785

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act on this <u>12</u> day of April, 2016.

Keith C. Smith, Authorized Representative

### <u>CERTIFICATE OF DESIGNATION</u> REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 605.0113, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

1. The name of the company is:

Silver Oaks Holding II, LLC

2. The name and address of the registered agent and office is:

Keith C. Smith, Esquire 121 North Collins Street Plant City, Florida 33563

Keith C. Smith, Authorized Representative

APR 2 2 2016

DATE

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.

KEITH C. SMITH, ESQUIRE

APR 2 2 2016

DATE