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Florida Department of State  
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Email Address:

dholmes@farr.com

**FLORIDA LIMITED LIABILITY CO.**

**Danzur, LLC**

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I — Name:**

The name of the Limited Liability Company is:  
**Danzur, LLC**

**ARTICLE II — Address:**

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

**Mailing Address:** c/o David A. Holmes  
Farr, Farr, Emerich, Hackett, Carr & Holmes, P.A.  
99 Nesbit Street  
Punta Gorda, Florida 33950

**Street Address:** 99 Nesbit Street  
Punta Gorda, FL 33950

**ARTICLE III — Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

David A. Holmes  
99 Nesbit Street  
Punta Gorda, Florida 33950

*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.*

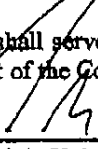
  
\_\_\_\_\_  
David A. Holmes, Registered Agent

**ARTICLE IV — Management**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager – managed company with the initial manager being:

Michael Zurbrigen  
99 Nesbit Street  
Punta Gorda, FL 33950

The initial manager shall serve until his resignation or removal in accordance with the terms of Operating Agreement of the Company.

  
\_\_\_\_\_  
David A. Holmes, Authorized Representative of a Member

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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