Note: Please print this page and use it as a cover shoot. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations Fax Number : (550)517-6381 n: Account Name : GREENE HAMRICK QUINLAN & SCHERMER, P.A. Account Number : 11999000030 Phone : (941)747-1871 Fax Number : (941)746-2886 "Enter the email address for this business entity to be used for future singual report mailings. Enter only one small address plesse." khorvath@manateelegai. FLORIDA LIMITED LIABILITY CO. Acorn Port Charlotte, LLC Certificate of Status 1 Certified Copy Page Count 01 \$160,00 Estimated Charge Corporate Filing Menu Help Electronic Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Acorn Port Charlotte, LLC

ARTICLE II - Address:

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

1515 U.S. 1, Suite 103 Sebastian, Florida 32958

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Robert F. Greene, Esq. 601 12th Street West Bradenton, Florida 34205

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 property 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.

ARTICLE IV - Management:

SIGNATURE

The name and address of each person/entity authorized to manage and control the limited liability company:

<u>Title</u>: MGR <u>Name and Address:</u> David Fahmle

1515 U.S. 1, Suite 103 Sebastian, Florida 32958

Signature of a member or an authorized representative of a member.

(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 in section 817.155, Florida Statutes)

Robert F. Greene
Typed or printed name of signee