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(Address)

(City/State/Zip/Phone #)

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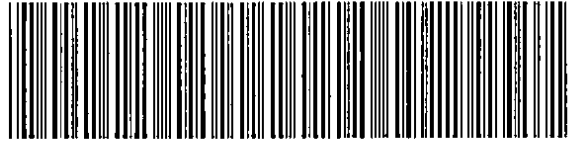
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- xx** **FILING** **FILING LLC** \_\_\_\_\_

1. **LEAVES OF CHANGE, LLC**  
(CORPORATE NAME AND DOCUMENT #) \_\_\_\_\_
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #) \_\_\_\_\_
3. \_\_\_\_\_  
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(CORPORATE NAME AND DOCUMENT #) \_\_\_\_\_

**SPECIAL  
INSTRUCTIONS:**

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**ARTICLES OF ORGANIZATION  
OF  
LEAVES OF CHANGE, LLC**

SECRETARY OF STATE  
TALLAHASSEE, FL

The undersigned hereby presents these Articles of Organization for the formation of a Limited Liability Company pursuant to the Florida Revised Limited Liability Company Act.

**ARTICLE I.  
NAME**

The name of the Company is LEAVES OF CHANGE, LLC.

**ARTICLE II.  
PRINCIPAL OFFICE**

The physical address and the mailing address for the Company is 4010 Cheverly Drive East, Lakeland, Florida 33813.

**ARTICLE III.  
DURATION**

The Company shall have perpetual existence, commencing on the date of the execution and acknowledgment of these Articles of Organization.

**ARTICLE IV.  
PURPOSE**

The Company is organized for the purpose of transacting any and all lawful business.

**ARTICLE V.  
MANAGEMENT**

The Company is to be a manager-managed company. The initial Manager of the Company shall be:

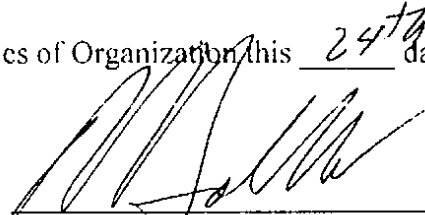
Jill A. Martinez  
4010 Cheverly Drive East  
Lakeland, Florida 33813

Christopher L. Asbill  
4010 Cheverly Drive East  
Lakeland, Florida 33813

**ARTICLE VI.**  
**INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT**

The street address of the initial registered office of the Company is One Lake Morton Drive, Lakeland, Florida 33801, and the name of the initial registered agent of the Company at that office is David D. Hallock, Jr.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of the Members of the Company has executed these Articles of Organization this 24<sup>th</sup> day of March, 2020.

  
\_\_\_\_\_  
DAVID D. HALLOCK, JR.

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TALLAHASSEE, FL

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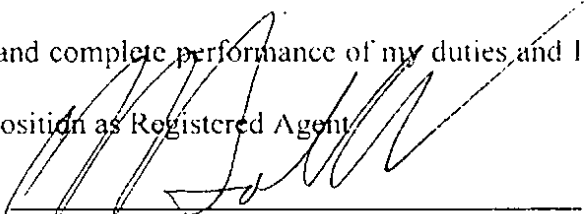
**CERTIFICATE OF DESIGNATION  
OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. The name of the Company is LEAVES OF CHANGE, LLC.
2. The name and street address of its initial Registered Agent and initial Registered Office are:

DAVID D. HALLOCK, JR.  
One Lake Morton Drive  
Lakeland, Florida 33801

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.

  
\_\_\_\_\_  
DAVID D. HALLOCK, JR.  
Date: March 24<sup>th</sup>, 2020