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To:

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Phone : (215)563-8113

: (215)977-9386

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA LIMITED LIABILITY CO. 6526 LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Fax: 12159779386

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is: 6526 LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE 11 - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 6527 Spyglass Circle, Fernandina Beach Amelia Island , FL 32034 Amelia Island , FL 32034

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Peter P. Oreen, Esqu	ire	
	Name	
8845 Ramblewood I	Drive, Unit 1704	
Florida street addres	ss (P.O. Box NOT ac	ceptable)
Coral Springs	FL	33071
City	State	Ζīp

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 standes 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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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AMBR = Authorized Member *MGR* = Manager AMBR Dr. Calvin Knowlton 6527 Snyalass Circle. Perusadina Beach Amelia Island. FL 32034 AMBR Dr. Orsula Knowlton 6527 Snyalass Circle. Perusadina Beach Amelia Island. FL 32034 AMBR (Use attachment if necessary) RINCLE V: Effective date, if other than the date of filing: (OPTIONAL) (optiona		No a.d Address
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