

**L20000164268**

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850)617-6381

**From:**

Account Name : M. BURR KEIM COMPANY  
Account Number : I19990000242  
Phone : (215)563-8113  
Fax Number : (215)977-9386

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

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
SWHTDORA, LLC**

Certificate of Status	0
Certified Copy	0
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

SWHTDORA, LLC

(Must contain the words "Limited Liability Company, "L.L.C." or "LLC.")

## ARTICLE II - Address:

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

Principal Office Address:Mailing Address:5301 FOUNTAIN DRIVE SOUTHAPT 604LAKE WORTH, FL 334675301 FOUNTAIN DRIVE SOUTHAPT 604LAKE WORTH, FL 33467

## ARTICLE III - Registered Agent, Registered Office, &amp; 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:

STEPHEN W. HERMAN

Name

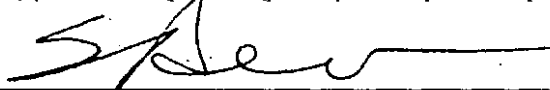
5301 FOUNTAIN DRIVE SOUTH, APT 604Florida street address (P.O. Box **NOT** acceptable)LAKE WORTHFL33467

City

State

Zip

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 60 F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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