



PROGRESS, L.C.

14824 EDWARDS CREEK ROAD
JACKSONVILLE, FL 32226
PHONE (904) 696-9197
FAX (904) 696-9294

FILED

JAN 31 AM 9:51

CLERK OF COURT
JACKSONVILLE, FL

L95000000098

24 January 1995

800001394078
-01/31/95--01077--002
***337.50 ***337.50


Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Gentlemen:

Enclosed is our check in the amount of \$337.50 and the fully executed Articles of Organization for Progress, L.C. as a Limited Liability Company

Please record the filing of our company and return a certified copy to my attention at the above address.

Regards,


Martha G. Edwards

enclosures

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

FILED
JUN 31 3 53 PM '93
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Proforma, L.L.C.

ARTICLE II - Address:

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

14824 Edwards Creek Road
Jacksonville, FL 32226-1306

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV - Management:

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

Martha G. Edwards
14824 Edwards Creek Road
Jacksonville, FL 32226-1306

Joseph J. Zaborac
14824 Edwards Creek Road
Jacksonville, FL 32226-1306

ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

No rights given.

ARTICLE VI - Members Rights to Continue Business:


The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

No rights given.

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____
Progress, L.C. _____ deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 1,000.00 .
- 3) if any, the agreed value of property other than cash contributed by member(s) is
\$ -0- . A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is
\$ 1,000.00 . This total includes amounts from 2 and 3 above.



Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit
constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Martha G. Edwards

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

Progress, L.C.

2. The name and address of the registered agent and office is:

Martha G. Edwards

(Name)

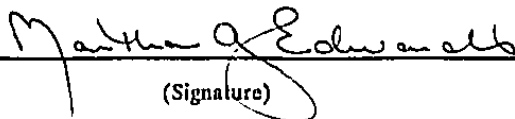
14824 Edwards Creek Road

(P.O. Box not acceptable)

Jacksonville, FL 32226-1306

(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.



(Signature)

01-24-95

(Date)

FILING FEE: \$ 35 for Designation of Registered Agent

FILE NOW: Fee after May 1, will be \$263.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1996		 FLORIDA DEPARTMENT OF STATE Sandra D. Morham Secretary of State DIVISION OF CORPORATIONS	
FILING FEE \$ 238.75		Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE	
1. Name and Mailing Address of Limited Liability Company DOCUMENT #L95000000098 PROGRESS, L.C. 14824 EDWARDS CREEK ROAD JACKSONVILLE FL 32226-1306		1a. Principal Place of Business Address 14824 EDWARDS CREEK ROAD JACKSONVILLE FL 32226	
<small>If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.</small>			
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Organized or Qualified 01/31/1995		3a. State of Formation FL	
4. FEI Number 59-3308782		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Date of Last Report		6. Certificate of Status Desired <input type="checkbox"/> 50 % Additional Fee Requested	
7. Name and Address of Current Registered Agent EDWARDS, MARTHA G 14824 EDWARDS CREEK ROAD JACKSONVILLE FL 32226		8. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.			
SIGNATURE _____		DATE _____	
<small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reappointing)</small>			
10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	EDWARDS, MARTHA G	14824 EDWARDS CREEK ROAD	JACKSONVILLE FL
MGRM	ZABORAC, JOSEPH J	14824 EDWARDS CREEK ROAD	JACKSONVILLE FL
200001854242 -06/06/96--01110--004 ***263.75 ***263.75			
11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address			
SIGNATURE: <i>Martha Edwards</i> MARTHA EDWARDS		5/31/96 (904) 696-1987	
<small>SIGNATURE AND PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small>		<small>DATE</small> <small>Daytime Phone #</small>	