

L95 000000564

CORPORATION OUTFITS

M. BURR KEIM COMPANY

105 NORTH WATTS STREET  
PHILADELPHIA, PA 19107-1983  
(215) 563-0113  
(FAX) (215) 977-9386  
1-800-533-0113

STOCK AND BOND CERTIFICATES  
MINUTE BOOKS, SEALS

FILED  
JUL 21 PM 3:10  
TALLAHASSEE, FLORIDA

July 20, 1995

EXPEDITED SERVICES  
Office of the Secretary of State  
409 East Gaines Street  
Tallahassee, FL 32301

100001543631  
-07/24/95--01020--001  
\*\*\*\*293.75 \*\*\*\*293.75

RE: RED PELICAN, L.C.

Ladies/Gentlemen:

Enclosed are Articles of Organization, Affidavit of Membership and Contributions and Certificate of Designation of Registered Agent/Office and our check in the amount of \$293.75 to cover the filing fees for the above proposed limited liability company.

Please expedite the filing and return the Certificate of Status to us as soon as possible.

Robert Worthington  
GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT *Corp Suffix + affidavit (4)*  
DATE 7/25  
W.O. EXAM ST

Very truly yours,

M. BURR KEIM COMPANY

*Robert Worthington*  
Robert Worthington

RW:sl  
Enclosure

SHARON L. TALA

JUL 21 1995

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY

FILED  
95 JUL 21 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

RED PELICAN L.C.

ARTICLE II - Address:

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

1645 B Manor Road, Englewood, FL 34223

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:

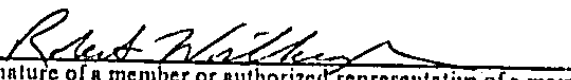
Paul Robert Dupont, Sr.  
P.O. Box 801  
Long Pond Farm  
Andover, NJ 07821

Julia Dupont  
P.O. Box 801  
Long Pond Farm  
Andover, NJ 07821

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of \_\_\_\_\_  
\_\_\_\_\_ RED PELICAN 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 \$ 500,000 .
- 3) if any, the agreed value of property other than cash contributed by member(s) is  
\$ --- . 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  
\$ 500,000 . 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.)  
Robert Worthington, Authorized Representative  
of Paul Robert Dupont, Sr.

FILING FEE: \$ 250 for Articles of Organization and Affidavit

**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: \_\_\_\_\_

RED PELICAN L.C.

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

Paul Robert Dupont, Jr.

(Name)

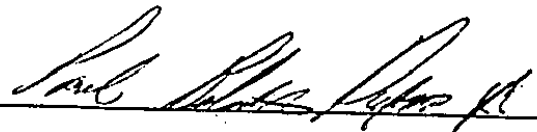
1645 B Manor Road

(P.O. Box not acceptable)

Englewood, FL 34223

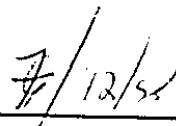
(City/State/Zip)

*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)

Paul Robert Dupont, Jr.



(Date)

FILING FEE: \$ 35 for Designation of Registered Agent

FILED  
95 JUL 21 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA