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WRITER'S DIRECT
DIAL NUMBER
(202) 973-2743

December 11, 1995

L95000000995

VIA FEDERAL EXPRESS

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

FILED
95 DEC 26 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Kodor, L.C.

Dear Sir/Madam:

Enclosed please find an original and one copy of the Articles of Organization, the Affidavit of Membership and Contributions, and the Certificate of Designation of Registered Agent and Registered Office of Kodor, L.C. In addition, please find a check payable to the Department of State in the amount of $337.50. kindly file the enclosed documents and return a certified copy to me.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

Frank S. Baldino

Frank S. Baldino

Enclosures

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FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 14, 1995

THOMPSON, HINE AND FLORY
1920 N. STREET N.W.
WASHINGTON, DC 20036-1601

SUBJECT: KODOR, L.C.
Ref. Number: W95000024412

We have received your document for KODOR, L.C. and check(s) totaling $337.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

An affidavit is required pursuant to section 608.407(2), Florida Statutes, declaring the following: (1) the limited liability company has at least two members; (2) the actual amount of cash contributions; (3) the agreed value of any property other than cash contributed; and (4) the total amount of cash or property anticipated to be contributed by the members.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6925.

Brenda Baker
Corporate Specialist

Letter Number: 195A00054184

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(202) 973-2743

December 19, 1995

Brenda Baker
Corporate Specialist
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Kodor, L.C.

Dear Ms. Baker:

Pursuant to the attached letter dated December 14, 1995, I have revised the affidavit accompanying the Articles of Organization for Kodor, L.C.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

Frank S. Baldino

Frank S. Baldino

Enclosures

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FILED

ARTICLES OF ORGANIZATION FOR

KODOR, L.C., A FLORIDA LIMITED LIABILITY COMPANY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the Limited Liability Company is Kodor, L.C.

ARTICLE II - Duration

The Limited Liability Company shall have perpetual existence.

ARTICLE III - Address

The mailing address and street address of the principal office of the Limited Liability Company is 11910 Glen Mill Road, Potomac, Maryland 20854.

ARTICLE IV - Registered Agent

The name and street address of the initial registered agent in the State of Florida of the Limited Liability Company is Nancy H. Canary, Thompson, Hine and Flory, Suite 117, 125 Worth Avenue, Palm Beach, Florida 33480-4466.

ARTICLE V - Admission of Additional Members

New members shall be admitted upon the unanimous consent of the existing members of the Limited Liability Company upon such term and conditions as the existing members shall unanimously agree.

ARTICLE VI - Members Rights to Continue Business

With the unanimous consent of the remaining members, the business of the Limited Liability Company shall continue upon 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.

ARTICLE V - Management

The Limited Liability Company is to be managed by a manager and the name and address of such manager who is to serve as manager until the first annual meeting of the members or until her successor is elected and qualified is Grace Anne Koppel, 11910 Glen Mill Road, Potomac, Maryland 20854.

IN WITNESS WHEREOF, I have set my hand this 14 day of November, 1995.

Grace Anne Koppel

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF

KODOR, L.C

The undersigned deposes and says:

1. The name of the Limited Liability Company is Kodor, L.C.

2. The Limited Liability Company has at least two members.

3. The members have contributed One Thousand Dollars ($1,000.00) in cash.

IN WITNESS WHEREOF, I have set my hand this 14 day of November, 1995.

(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.)

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT AND REGISTERED OFFICE OF

KODOR, L.C.

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TALLAHA... EE, FLORIDA

Pursuant to the provisions of section 608.415, Florida statutes, the undersigned Limited Liability Company submits the following statement in designating the registered office and registered agent, in the State of Florida.

1. The name of the Limited Liability Company is Kodor, L.C.

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

Nancy H. Canary
Thompson, Hine and Flory
Suite 117
125 Worth Avenue
Palm Beach, Florida 33480-4466

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.

Nancy H. Canary
(Signature)

Nov 20, 1995
(Date)

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2nd.NOTICE: **Limited Liability Company Will Be Dissolved On Or After August 21, 1996. If Dissolved, Minimum Amount Due To Reinstate: $738.75**

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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FILING FEE $ 263.75 | Annual Report $100.00 + $138.75 Corporation Supplemental Fee + $25.00 LATE FEE | Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address of Limited Liability Company

DOCUMENT # L95000000995

KODOR, L.C.
11910 GLEN MILL RD
POTOMAC MD 20854

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

1a. Principal Place of Business Address

11910 GLEN MILL RD
POTOMAC MD 20854

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: 12/26/1995

3a. State of Formation: FL

4. FEI Number: 52-1985678 ☐ Applied For ☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired $8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

CANARY, NANCY H
125 WORTH AVE
SUITE 117
PALM BEACH FL 33480

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 _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	KOPPEL, GRACE A	11910 GLEN MILL RD	POTOMAC MD

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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: Grace Koppel, G.P. GRACE ANNE KOPPEL 6-7-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #

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