

1201 HAYS STREET
MIAMI, FL 33131-4335
(305) 421-1100
(305) 421-1101
00001420006

L96000000813



PROMOTE HALL
LEGAL & FINANCIAL SERVICES ACCOUNT NO. : 072100000032

REFERENCE : 036683 4369500

AUTHORIZATION : *Patricia Tzitzith*

COST LIMIT : \$ 337.50

ORDER DATE : July 30, 1996

ORDER TIME : 11:16 AM

ORDER NO. : 036683

CUSTOMER NO: 4369500

CUSTOMER: Judy Diamond, Legal Assistant
MCDERMOTT, WILL & EMERY

201 South Biscayne Boulevard
22nd Floor
Miami, FL 33131-4335

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
55 JUL 30 PM 5:19
Please file first

DOMESTIC FILING

500001808445

NAME: DEVOE AND MATTHEWS, L.C.

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
XX LIMITED LIABILITY COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jennifer Moran

EXAMINER'S INITIALS:

*502-672
W96-15904*

*55 JUL 30 PM 5:19
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DIVISION OF CORPORATIONS*



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 31, 1996

CSC NETWORKS
1201 HAYS STREET
TALLAHASSEE, FL 32301

SUBJECT: DEVOE AND MATTHEWS, L.C.
Ref. Number: W96000015964

RESUBMIT
Please give original
submission date as file date.

We have received your document for DEVOE AND MATTHEWS, L.C. and the authorization to debit your account in the amount of \$337.50. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

If you have any questions concerning the filing of your document, please call (904) 487-6973.

Claretha Golden
Document Specialist

Letter Number: 496A00036640

FILED
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DIVISION OF CORPORATIONS
96 JUL 30 AM 9:43

FILED
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DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION

96 JUL 30 AM 9:43

OF

DEVOE AND MATTHEWS, L.C.

ARTICLE I - NAME

The name of this limited liability company is DEVOE AND MATTHEWS, L.C. (the "Company").

ARTICLE II - DURATION

The Company shall exist from the date of filing these Articles of Organization with the Department of State until the occurrence of any of the events specified in Florida Statutes Section 608.441, unless continued by the unanimous consent of all of the remaining members of the Company (the "Members").

ARTICLE III - MAILING ADDRESS AND STREET ADDRESS

The mailing address and street address of the Company is 348 Miracle Strip Parkway, S.W., Fort Walton Beach, Florida 32548.

ARTICLE IV - INITIAL REGISTERED AGENT AND OFFICE

The name of the initial registered agent of the Company is Norman Daniel Matthews, and the street address of the initial registered agent of the Company is 348 Miracle Strip Parkway, S.W., Fort Walton Beach, Florida 32548.

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

Additional members to the Company may be admitted, but only if all the current Members agree to the admission of the additional members and to the terms of admission.

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS

If a Member of the Company dies, retires, resigns, is expelled, is dissolved, experiences bankruptcy, or upon the occurrence of any other event which terminates the continued membership of a Member in the Company, the remaining Members may, by unanimous written agreement, continue the business of the Company.

ARTICLE VII - MANAGEMENT OF THE COMPANY

The Company shall be managed five (5) managers (the "Managers"). The following is a list of the names and addresses of the five (5) individuals who shall initially serve as Managers of the Company until the first annual meeting of the Members or until their successors are elected and qualify:

	<u>Name</u>	<u>Address</u>
1.	Lawrence M. Schadege	43865 Airport View Drive Hollywood, Maryland 20636
2.	Matthew G. Duranske	43865 Airport View Drive Hollywood, Maryland 20636
3.	Allan D. Crane	43865 Airport View Drive Hollywood, Maryland 20636
4.	Norman Daniel Matthews	187 County Club Road Shalimar, Florida 32579
5.	Douglas R. DeVoe	9370 Chelmesford Court Navarre, Florida 32566


Thereafter, the Managers shall be elected annually as provided in the Company's regulations (Regulations").

ARTICLE VIII - REGULATIONS

The Members shall have the power to adopt, alter, amend, or repeal the Regulations of the Company containing provisions for the regulation and management of the affairs of the Company.

IN WITNESS WHEREOF, the undersigned, being all of the original Members of the Company, have executed these Articles of Organization, this 26th day of July, 1996.

PRB ASSOCIATES, INC., a Maryland corporation, Member

By: 
Print Name: BENJAMIN S. FARRAH
Title: CFO / TRAVELER

[Corporate Seal]


NORMAN DANIEL MATTHEWS, Member


DOUGLAS R. DEVOE, Member

STATE OF Maryland SS:
COUNTY OF Calvert

BEFORE ME, the undersigned authority, personally appeared BENJAMIN S. FAIRHART, as the CFO/TREASURER of PRB ASSOCIATES, Inc., a Maryland corporation, who after first being duly sworn, acknowledged that (s)he executed before me the foregoing instrument on behalf of said corporation for the purposes therein expressed. He/She is personally known to me or produced _____ as identification.

Maryland WITNESS my hand and official seal in the State of this 26th day of July, 1996.

Yvonne R. Gibson
Print Name: Yvonne R. Gibson
NOTARY PUBLIC, State of Maryland

My Commission Expires: 8/16/97

STATE OF FLORIDA)
COUNTY OF Orange) SS:

BEFORE ME, the undersigned authority, personally appeared NORMAN DANIEL MATTHEWS, who after first being duly sworn, acknowledged that (s)he executed before me the foregoing instrument for the purposes therein expressed. He is personally known to me or produced _____ as identification.

WITNESS my hand and official seal in the State of Florida this 26 day of July, 1996.



Lisa A. Vaughn
Print Name: LISA A VAUGHN
NOTARY PUBLIC, State of Florida

My Commission Expires: 3-17-00

STATE OF FLORIDA)
COUNTY OF Orange) SS:

BEFORE ME, the undersigned authority, personally appeared DOUGLAS R. DEVOE, who after first being duly sworn, acknowledged that (s)he executed before me the foregoing

instrument for the purposes therein expressed. He is personally
known to me or produced _____ as identification.

WITNESS my hand and official seal in the State of
Florida this 26 day of July, 1996.



LISA A. VAUGHN
COMMISSION # CC 640607
EXPIRES MAR 17, 2000
BONDED THRU
ATLANTIC BONDING CO. INC.

Lisa A. Vaughn
Print Name: Lisa A. Vaughn
NOTARY PUBLIC, State of Florida

My Commission Expires: 3-17-00

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned Member of DEVOE AND MATTHEWS, 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 Members is \$1,000.00. No property other than cash has been contributed by the Members.
3. The total amount of cash or property anticipated to be contributed by the Members is \$1,000.00. This total amount includes the amount from 2 above.

PRB ASSOCIATES, INC., a Maryland corporation, Member

By: Benjamin S. Farrah
Print Name: BENJAMIN S. FARRAH
Title: CFO/TREASURER

[Corporate Seal]

STATE OF Maryland SS:
COUNTY OF Calvert

BEFORE ME, the undersigned authority, personally appeared BENJAMIN S. FARRAH, as the CFO/TREASURER of PRB ASSOCIATES, INC., a Maryland corporation, who after first being duly sworn, acknowledged that (s)he executed before me the foregoing instrument on behalf of said corporation for the purposes therein expressed. He/She is personally known to me or produced _____ as identification.

WITNESS my hand and official seal in the State of Maryland this 25th day of July, 1996.

Yvonne R. Gibson
Print Name: Yvonne R. Gibson
NOTARY PUBLIC, State of Maryland

My Commission Expires: 8/16/97

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JUL 30 AM 9:43

PURSUANT TO THE PROVISIONS OF SECTION 608.415, 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:
DEVOE AND MATTHEWS, L.C.
2. The name and address of the registered agent and office is:

Norman Daniel Matthews
348 Miracle Strip Parkway, S.W.
Fort Walton Beach, Florida 32548

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.



NORMAN DANIEL MATTHEWS, Registered
Agent

Dated: July 26, 1996

FILE NOW: Fee after May 1, will be \$588.75

**LIMITED LIABILITY COMPANY
ANNUAL REPORT
1997**



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

FILED
97 JAN 29 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE
\$ 203.75
Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address
of Limited Liability Company

DOCUMENT #J96000000813

DEVON AND MATTHEWS, L.C.
348 MIRACLE STRIP PARKWAY S.W., Suite 23
FORT WALTON BEACH FL 32548

1a. Principal Place of Business Address

348 MIRACLE STRIP PARKWAY S.W.
FORT WALTON BEACH FL 32548

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

2. Principal Place of Business

Same

2a. Mailing Address

Suite, Apt. #, etc.

Suite 23

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

07/30/1996

3a. State of Formation

FL

4. FEI Number

59-3393175

☐ Applied For

☐ Not Applicable

5. Date of Last Report

N.A.

6. Certificate of Status Desired

7. Name and Address of Current Registered Agent

MATTHEWS, NORMAN D
348 MIRACLE STRIP PARKWAY S.W., Suite 23
FORT WALTON BEACH FL 32548

8. Name and Address of New Registered Agent

Name

5000002074009-1-1

Street Address (P.O. Box Number is Not Applicable)

*****203.75 ***203.75**

Suite, Apt. #, etc.

Suite 23

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.410 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

Norman D. Matthews

DATE

27 Jan 97

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reappointing)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	SCHADEGG, LAWRENCE M	43865 AIRPORT VIEW DRIVE	HOLLYWOOD MD, 20636
MGR	DURANSKE, MATTHEW G	43865 AIRPORT VIEW DRIVE	HOLLYWOOD MD, 20636
MGR	CRANE, ALLAN D	43865 AIRPORT VIEW DRIVE	HOLLYWOOD MD, 20636
MGR	MATTHEWS, NORMAN D	187 COUNTY CLUB ROAD 348 Miracle Strip Pkwy S.W., #23	CHALMERS FL F.W.B., FL 32548
MGR	DEVOS, DOUGLAS R	9370 CHELMEFORD COURT 348 Miracle Strip Pkwy S.W., #23	NAVARRE FL F.W.B., FL 32548

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Norman D. Matthews*, Norman D. Matthews, 27 Jan 97, 904-244-3221

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #