

**CORPORATE
ACCESS,
INC.**

L98000002437

1116-D Thomasville Road . Mount Vernon Square . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 dr (800) 969-1666 Fax (850) 222-1666

WALK IN OF CORPORATION

PICK UP

10/27/98 J.D.D. (C)

☒ CERTIFIED COPY

CUS

PHOTO COPY

☒ FILING LC

1.) HAINES-GR, L.L.C
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

6.) _____
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(CORPORATE NAME & DOCUMENT #)

9.) _____
(CORPORATE NAME & DOCUMENT #)

10.) _____
(CORPORATE NAME & DOCUMENT #)

Please file with
27th feb date.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
RECEIVED
98 OCT 27 AM 9:30
98 OCT 28 AM 9:19

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10/27/98

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SPECIAL INSTRUCTIONS

ARTICLES OF ORGANIZATION FOR HAINES-GP, L.L.C.

ARTICLE 11: NAME

The name of the Limited Liability Company is: **HAINES-GP, L.L.C.**

ARTICLE 12: ADDRESS

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

300 East State Street
Jacksonville, Florida 32202

ARTICLE 13: DURATION

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

ARTICLE 14: MANAGEMENT

The Limited Liability Company is to be managed by the members and the name and address of the Managing Member is:

Samuel M. Easton, Jr.
c/o Easton, Sanderson & Company
300 East State Street
Jacksonville, Florida 32202

ARTICLE 15: ADMISSION OF ADDITIONAL MEMBERS

The right, if given of the members Limited Liability Company to admit additional members and the terms and conditions of the admissions shall be governed by the Operating Agreement for the Limited Liability Company, of an even date herewith.

ARTICLE 16: MEMBERS RIGHTS TO CONTINUE BUSINESS:

The right, if given of the 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 governed by the Operating Agreement for the Limited Liability Company, of an even date herewith.

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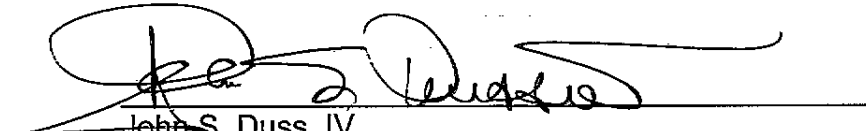
ARTICLE 17: REGISTERED AGENT

The name and address of the registered agent for service of process required to be maintained by section 608.412, Florida Statutes, is:

John S. Duss, IV, Esq.
Ford, Jeter, Bowlus & Duss, P.A.
10110 San Jose Boulevard
Jacksonville, Florida 32257

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IN WITNESS WHEREOF, John S. Duss, IV, Esq., as authorized person, executed these Articles of Organization this 27th day of October, 1998.



John S. Duss, IV
Authorized Person

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent 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.



John S. Duss, IV


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AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

I, **John S. Duss, IV**, as authorized person, having been duly authorized by the members of **HAINES-GP, L.L.C.**, the limited liability company formed hereby, depose and say:

1. The above named Limited Liability Company has at least two members.
2. The total amount of cash contributed by the members is: \$700,000
3. There is no property anticipated to be contributed by the members.
4. The total amount of cash or property anticipated to be contributed by the members is: \$700,000
5. Total amounts of items 2,3 and 4 above is: \$700,000

IN WITNESS WHEREOF, John S. Duss, IV, as authorized person, executed this Affidavit this 27th day of October, 1998.



John S. Duss, IV, Authorized Person

SWORN TO and subscribed before
me this 27th day of October,
1998, by John S. Duss, IV



Notary Public, State and County
aforesaid

My Commission expires: _____
Commission No: _____
 LISA J. HATCHER
MY COMMISSION # CC448493 EXPIRES
March 26, 1999
BONDED THRU TROY FAIN INSURANCE, INC.

He: (please check appropriate statement)
☒ is personally known to me
☐ produced identification (specify type):
