

L98000002668

Greenberg Traurig

June
(Requestor's Name)

(Address)

(City, State, Zip) (Phone #)

OFFICE USE ONLY

98 NOV 12 PM 1:08

SECRETARY OF STATE
DIVISION OF CORPORATIONS

Please call ASAP when ready. Thanks! June 22-6891

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Florida Growth Capital, LLC
(Corporation Name)

700002685797-2

-11/12/98--01068--005

***346.25 ***346.25

Name Availability	2. <i>[Signature]</i>	(Corporation Name)	(Document #)
Document Examiner	3. <i>[Signature]</i>	(Corporation Name)	(Document #)
Updater Verifier	4. <i>[Signature]</i>	(Corporation Name)	(Document #)
Acknowledgement	<input checked="" type="checkbox"/> Pick up time	4:00 today please! Thanks!	
P. Verifier	<input type="checkbox"/> Will wait	<input checked="" type="checkbox"/> Certified Copy	<input checked="" type="checkbox"/> Certificate of Status

Call when ready 521-0076

NEW FILINGS	
Profit	
NonProfit	
<input checked="" type="checkbox"/> Limited Liability	
Domestication	
Other	

AMENDMENTS	
Amendment	
Resignation of R.A., Officer/Director	
Change of Registered Agent	
Dissolution/Withdrawal	
Merger	

OTHER FILINGS	
Annual Report	
Fictitious Name	
Name Reservation	

REGISTRATION/QUALIFICATION	
Foreign	
Limited Partnership	
Reinstatement	
Trademark	
Other	

Please use 2nd orig. as certified copy. Buck said that would be OK.

Call right away if there are problems

Examiner's Initials

**TRANSMITTAL LETTER FOR FLORIDA
LIMITED LIABILITY COMPANY**

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Florida Growth Capital, L.L.C.
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit
\$ 35.00 Designation of Registered Agent

A letter of acknowledgment will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50. **Please send one check for the total amount made payable to the Florida Department of State.**

FROM: FLORIDA GROWTH CAPITAL, L.L.C.
David G. Franklin; Managing Director
Name (Printed or typed)

8714 PISA DRIVE, Suite 813

Address

ORLANDO FLORIDA 32810-2160

City, State & Zip

407-660-0601

Daytime Telephone number

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is:

Florida Growth Capital, L.L.C.

ARTICLE II- Address:

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

8714 Pisa Drive, Suite 813, Orlando, Florida 32810-2160

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:

David G. Franklin
8714 Pisa Drive
Suite 813
Orlando, Florida 32810-2160

Larry C. Maddox
6602 West 131st Street
Overland Park, Kansas 66209

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED

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: Florida Growth Capital, L.L.C.

2. The name and address Of the registered agent and Office is:

David G. Franklin

(NAME)

8714 Pisa Drive, Suite 813

(P. O. BOX NOT ACCEPTABLE)

Orlando, Florida 32810-2160

(CITY/STATE/ZIP)

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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.

David Franklin

(SIGNATURE)

November 11, 1998

(DATE)

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of _____
Florida Growth Capital, L.L.C. _____ deposits 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 \$ 100.00
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ NA.
A description of the property is attached and made a part hereto.
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$ NA.
- 5) the total amounts of 2, 3 and 4 is \$ 100.00

Rare Shanklin, Managing Partner
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.)

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