### 00002718 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 6000002844186 (Corporation Name) \*\*\*\*302.50 \*\*\*\*302.50 (Corporation Name) 600002844186--7 -05/10/99--01152--002 \*\*\*\*\*35.00 \*\*\*\*\*35.00 (Corporation Name) Certified Copy Pick up time Walk in Photocopy Certificate of Status Mail out Will wait AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other Name REGISTRATION/ OTHER FILINGS Availability QUALIFICATION Document Annual Report Examiner Foreign Fictitious Name Updater Limited Partnership Name Reservation ∪ .cla†er Reinstatement verifyer Acknowledgement Trademark v.. P. Verifyer Other Examiner's Initials



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 29, 1999

LLR OF TAMPA, L.L.C. 10601 HATTERAS DRIVE TAMPA, FL 33615

SUBJECT: LLR OF TAMPA, L.L.C. Ref. Number: W99000009486

We have received your document for LLR OF TAMPA, L.L.C. and your check(s) totaling \$302.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the names and street addresses of the members or managers of the limited liability company.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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 (850) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 499A00020864

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is: LLR of Tampa, L.L.C.

#### ARTICLE II - Address:

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

10601 Hatteras Drive Tampa, FL 33615

**ARTICLE III - Duration:** 

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

perpetual

MAY 12 PM 1:5

ARTICLE IV - Management:
(Check the appropriate box and complete the 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:

Lora Loethen Roberson 10601 HATTERAS DRIVE TAMPA, FL 33615

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:

#### ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Upon approval of ninety percent (90%) of the members

# ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining 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:

Upon approval of a majority in interest of the remaining members

## ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of	LLR of Tampa, L.L.C.
	certifies:
<ol> <li>the above named limited liability company has at least one member;</li> <li>the total amount of cash contributed by the member(s) is</li> </ol>	<u> </u>
<ul> <li>3) if any, the agreed value of property other than cash contributed by member (A description of the property is attached and made a part hereto.); and</li> <li>4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is</li> </ul>	r(s) is \$
	<del>-</del>
Soit-Robonson	-
Signature of a member or an authorized representative of a	
(In accordance with section 608.408(3), Florida Statutes, the executaffidavit constitutes an affirmation under the penalties of perjury the stated herein are true.)	tion of this at the facts
Lora Loethen Roberson  Typed or printed name of signee	<u> </u>

Filing Fee: \$250.00 for Articles 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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:	· ·
LLR OF TAMPA, L.L.C.	
2. The name and the Florida street address of the registered agent are:	· 🚾
LORA LOETHEN ROBERSON NAME	<del></del>
10601 HATTERAS DRIVE Florida street address (P. O. Box NOT ACCEPTABLE)	<u> </u>
TAMPA, FL 33615 CITY, STATE AND 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

Filing Fee: \$ 35 for Designation of Registered Agent