



ACCOUNT NO. : 072100000032

REFERENCE : 481770 7197803

AUTHORIZATION :

*Patricia Pizito*

COST LIMIT : \$ 125

ORDER DATE : November 15, 1999

ORDER TIME : 3:16 PM

ORDER NO. : 481770-005

800003058408--2

CUSTOMER NO: 7197803

CUSTOMER: Mr. John D. Adams  
MR. JOHN D. ADAMS  
MR. JOHN D. ADAMS  
1218 Peabody Court

Jacksonville, FL 32221

DOMESTIC FILING

NAME: DYNAMIC, LLC

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christine Lillich

EXAMINER'S INITIALS:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 DEC -2 AM 10:23

FILED

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

99 DEC -2 AM 8:52

RECEIVED

*42 12/2*

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

DYNAMIC, LLC

**ARTICLE II - Address:**

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

1218 PEABODY COURT, JACKSONVILLE, FLORIDA 32221

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

<u>CORPORATION SERVICE COMPANY.</u>		
Name		
<u>1201 HAYS STREET</u>		
Florida street address (P.O. Box <b>NOT</b> acceptable)		
<u>TALLAHASSEE</u>	<u>FL</u>	<u>32301</u>
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 as provided for in Chapter 608, F.S..*

Laura R. Dunlap  
Registered Agent's Signature

**Article IV - Management (Check box if applicable.)**

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Laura R. Dunlap  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ITS AGENT, LAURA R. DUNLAPS  
Typed or printed name of signee

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TALLAHASSEE FLORIDA

**FILING FEES:**

\$ 100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (OPTIONAL)  
\$ 5.00 Certificate of Status (OPTIONAL)

LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Corporation ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of DYNAMIC, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein by CSC without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this  
1<sup>st</sup> day of December, 1999.

Sam Bartlett  
WITNESS

Sam Bartlett  
TYPED OR PRINTED NAME

David Henry  
WITNESS

DAVID HENRY  
TYPED OR PRINTED NAME

John D. Adams Jr.  
SIGNATURE  
John D. Adams Jr.  
TYPED OR PRINTED NAME

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TALLAHASSEE  
FLORIDA