DIVISION OF CORPORATIONS 12/29/99

REGISTRATION SECTION
P.O.BOX 6327
TALLAHASSEE, FL. 32314

RE: COVER LETTER FOR APPLICATION CONTAINED HEREWITH FOR AN LLC NAMED T.A.C. Y2K L.L.C.

THIS APPLICATION IS BEING SUBMITTED BY DAVID B.COX

HIS CURRENT ADDRESS IS,1989 IMPERIAL GOLF COURSE BLVD., NAPLES, FL. 34110.

HIS DAYTIME PHONE # IS (941) 566 3232.

THANK YOU, RESPECTFULLY,

800003086438--5 -01/03/00--01122--011 *****293.75 ****155.00

DAVID B.COX

OOFEB-9 PH 3: 37
SECRETARY OF STATE TALLAHASSEE FLORIDA

13875



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 10, 2000

DAVID B. COX 1989 IMPERIAL GOLF COURSE NAPLES, FL 34110

SUBJECT: T.A.C. Y2K L.L.C. Ref. Number: W00000000708



We have received your document for T.A.C. Y2K L.L.C. and your check(s) totaling \$293.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

Also, the fee for filing has been reduced. Please sign and date the indicated lines of the attached refund application, and return it with your corrected form and a copy of this letter.

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) 487-6958.

Lee Rivers Document Specialist

Letter Number: 000A00001212

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

T.A.C. Y2K L.L.C.

ARTICLE II - Address:

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

1989 IMPERIAL GOLF COURSE BLVD.

NAPLES, FL. 34110

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

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

Name

1989 IMPERIAL GOLF COURSE BLVD.

Florida street address (P.O. Box NOT acceptable)

NAPLES FL 34110

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..

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 in therefore, a manager - managed company.

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

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.)

WILLIAM A.JOHNSON

Typed or printed name of signee

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)