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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

: AKERMAN, SENTERFITT & EIDSON, P.A. (FT. LAUDERDALE)

Account Name : AKERMAN, SENT: Account Number : Il9980000010 Phone : (954)463-2700 Fax Number : (954)463-2224

LIMITED LIABILITY COMPANY

CARKENTRE, LLC

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Certificate of Status	Û
Certified Copy	
Page Count	03
Estimated Charge	\$155.00

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AUGUST 21, 2001

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is CARKENTRE, LLC.

ARTICLE II - Address

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

c/o Ramon A. Rodriguez 350 East Las Olas Blvd., 14th Floor Fort Lauderdale, FL 33301

ARTICLE III - Existence and Duration

The Limited Liability Company shall commence its existence on the date that these Afficles of Organization are filed and its duration shall be perpetual.

ARTICLE IV - Management

The Limited Liability Company is to be a manager-managed company.

ARTICLE V - Registered Agent

The name and street address of the initial registered agent of the Limited Liability Company is:

Ramon A. Rodriguez 350 East Las Olas Blvd., 14th Floor Fort Lauderdale, FL 33301

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Juguet to ,2001
(DATE)

The TRESA LESLIE STILES TRUST (1998), Member

By: VERRY W. STILES, Trustee

The CARRIE LYNN STILES TRUST,

Member

By: TERRY W. STILES, Trustee

The KENNETH LLOYD STILES

RODRIGUEZ, Trice

TRUST (1998), Member

By: TERRY W. STILES, Truste

(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 tries?

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REGISTERED AGENT ACCEPTANCE

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..

RAMON A. RODRIGUEZ POLICEUR

Dates Dates

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