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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

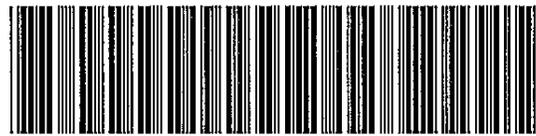
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ACCOUNT NO. : 072100000032

REFERENCE : 867338 .80398A

AUTHORIZATION : *Patricia Pignato*

COST LIMIT : \$ 155.00

ORDER DATE : December 20, 2002

ORDER TIME : 2:20 PM

ORDER NO. : 867338-005

CUSTOMER NO: 80398A

CUSTOMER: Kathy Schmidt
Siesky, Pilon & Wood

Suite 201, the Fairway Bldg
1000 Tamiami Trail North
Naples, FL 34102

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DOMESTIC FILING

NAME: 5770 SHIRLEY STREET, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I - NAME

The name of the Limited Liability Company is:

5770 SHIRLEY STREET, LLC

ARTICLE II - ADDRESS

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

2101 Tarpon Road, Naples, Florida 34102

ARTICLE III - DESIGNATION OF REGISTERED AGENT

The name and the Florida street address of the registered agent are: **Douglas A. Wood, Esq.**, Siesky, Pilon, & Wood, 1000 Tamiami Trail North, Suite 201, Naples, Florida 34102.

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, Florida Statutes.



DOUGLAS A. WOOD, ESQ.

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one manager. The name and address of the initial Manager of the Company is:



Dawn Del Duca, Manager
2101 Tarpon Rd., Naples, FL 34109