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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850) 205-0383

From: Account Name : MICHAEL A. PYLE, P.A.  
Account Number : I20000000053  
Phone : (386) 615-9007  
Fax Number : (386) 676-2615

DIVISION OF CORPORATIONS

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**LIMITED LIABILITY COMPANY**

**DYLEWSKI MANAGEMENT, LLC**

Certificate of Status	0
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*Handwritten signature and date: 10-14-03*

**ARTICLES OF ORGANIZATION  
OF  
DYLEWSKI MANAGEMENT, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, *Florida Statutes*, hereby executes the following Articles of Organization.

**ARTICLE I  
NAME**

The name of the Limited Liability Company is **DYLEWSKI MANAGEMENT, LLC.**

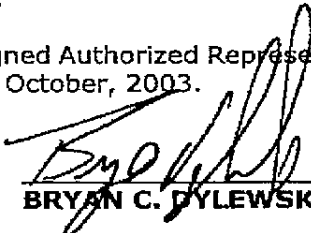
**ARTICLE II  
ADDRESS**

The street address and the mailing address of the principal office of the Company is **245 Riverside Drive, Holly Hill, Florida 32117.**

**ARTICLE III  
REGISTERED OFFICE AND AGENT**

The name and Florida street address of the registered agent is **Bryan C. Dylewski, 245 Riverside Drive, Holly Hill, Florida 32117.**


**IN WITNESS WHEREOF**, the undersigned Authorized Representative has executed these Articles of Organization on this 13<sup>th</sup> day of October, 2003.

  
\_\_\_\_\_  
**BRYAN C. DYLEWSKI**

03 OCT 13 11:33  
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**STATE OF FLORIDA  
COUNTY OF VOLUSIA**

The foregoing instrument was acknowledged before me this 13<sup>th</sup> day of October, 2003, by **BRYAN C. DYLEWSKI** who  is personally known to me, or  who presented a Florida drivers license or  a \_\_\_\_\_ drivers license or  \_\_\_\_\_, as identification.

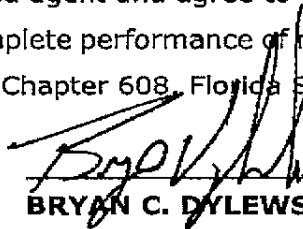
 Michael A Pyle  
My Commission CC877232  
Expires December 3, 2003

  
\_\_\_\_\_  
Notary Public  
**MICHAEL A. PYLE**  
(Printed Name)  
My Commission Expires \_\_\_\_\_  
 Michael A Pyle  
My Commission CC877232  
Expires December 3, 2003

(In accordance with Section 608.408(2), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**ACCEPTANCE OF DESIGNATION**

Having been named Registered Agent to accept service of process for the above stated Limited Liability Company at the place designated in the above Articles of Organization, I hereby accept the appointment as registered agent and 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 provided in Chapter 608, Florida Statutes.

  
\_\_\_\_\_  
**BRYAN C. DYLEWSKI**, Registered Agent

ARTICLE  
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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA