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(Requestor's Name)

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(Address)

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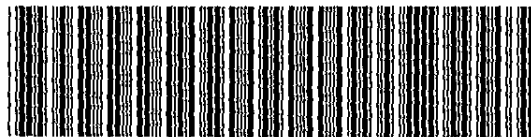
(Business Entity Name)

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**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Conway Trust, LLC

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TALLAHASSEE, FLORIDA

- Art of Inc. File \_\_\_\_\_
- LTD Partnership File \_\_\_\_\_
- Foreign Corp. File \_\_\_\_\_
- L.C. File \_\_\_\_\_
- Fictitious Name File \_\_\_\_\_
- Trade/Service Mark \_\_\_\_\_
- Merger File \_\_\_\_\_
- Art. of Amend. File \_\_\_\_\_
- RA Resignation \_\_\_\_\_
- Dissolution / Withdrawal \_\_\_\_\_
- Annual Report / Reinstatement \_\_\_\_\_
- Cert. Copy \_\_\_\_\_
- Photo Copy \_\_\_\_\_
- Certificate of Good Standing \_\_\_\_\_
- Certificate of Status \_\_\_\_\_
- Certificate of Fictitious Name \_\_\_\_\_
- Corp Record Search \_\_\_\_\_
- Officer Search \_\_\_\_\_
- Fictitious Search \_\_\_\_\_
- Fictitious Owner Search \_\_\_\_\_
- Vehicle Search \_\_\_\_\_
- Driving Record \_\_\_\_\_
- UCC 1 or 3 File \_\_\_\_\_
- UCC 11 Search \_\_\_\_\_
- UCC 11 Retrieval \_\_\_\_\_
- Courier \_\_\_\_\_

Signature \_\_\_\_\_

Requested by: \_\_\_\_\_

Name SP Date 11/15/04 Time 10:15

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

ARTICLES OF ORGANIZATION FOR  
CONWAY TRUST, LLC  
A FLORIDA LIMITED LIABILITY COMPANY

FILED  
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PM 2:34  
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ARTICLE I - NAME

The name of the Limited Liability Company is: **CONWAY TRUST, LLC**

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: **10155 Whisper Pointe Drive, Tampa, Florida 33647.**

ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be: **Until dissolved pursuant to its Operating Agreement.**

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the members. The names and addresses of the managing members are:

**Adam Kelley Conway  
10155 Whisper Pointe Drive  
Tampa, Florida 33647**

**Beth McMurtry Conway  
10155 Whisper Pointe Drive  
Tampa, Florida 33647**

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS**

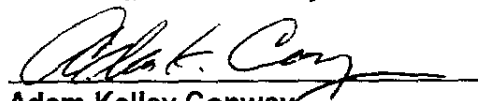
The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be. **Additional members may be admitted only as unanimously agreed upon by the Members as set forth in the Operating Agreement.**


**ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: **Only with the consent of all the remaining Members.**

IN WITNESS WHEREOF, these Articles of Organization have been signed, as Managing Members, by: **Adam Kelley Conway and Beth McMurtry Conway.**

Dated this 5<sup>th</sup> day of November, 2004.

  
**Adam Kelley Conway**  
Managing Member

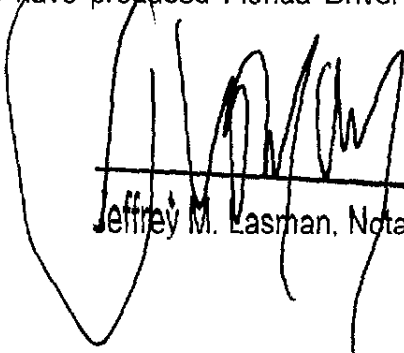
  
**Beth McMurtry Conway**  
Managing Member

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 5<sup>th</sup> day of November, 2004, by **Adam Kelley Conway** and **Beth McMurtry**, who have produced Florida Driver Licenses as identification.



**JEFFREY M. LASMAN**  
COMMISSION # DD 066626  
EXPIRES OCT. 22, 2005  
BONDED THROUGH  
ATLANTIC BONDING CO., INC



Jeffrey M. Lasman, Notary Public

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **CONWAY TRUST, LLC**
2. The name and address of the registered agent and office is:

**Jeffrey M. Lasman, Esquire  
LASMAN LAW FIRM, P.A.  
1210 Millennium Parkway  
Brandon, Florida 33511**

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.

  
\_\_\_\_\_  
Jeffrey M. Lasman

November 5, 2004  
(Date)