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LIMITED LIABILITY COMPANY

SOMERDALE PARTNERS, L.L.C.

| Certificate of Status | 1 |
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ARTICLES OF ORGANIZATION OF SOMERDALE PARTNERS, L.L.C.

In order to form a limited liability company pursuant to the Florida Limited Liability Company Act, Florida Statutes § 608.401 et seq. (the "Act"), the undersigned hereby executes these Articles of Organization in accordance with the provisions of Section 608.407 of the Act.

ARTICLE I: NAME

The name of the Limited Liability Company is: Somerdale Partners, L.L.C.

ARTICLE II:

The mailing address of the principal office of the Limited Liability Company is: P.O. Box 10608, Naples, Florida 34101. The street address of the principal office of the Limited Liability Company is 1164 Goodlette Road, Naples, Florida 34102.

ARTICLE III DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV REGISTERED AGENT

The name and address of the Limited Liability Company's registered agent and office is Clifford A. Olson, at 1164 Goodlette Road, Naples, Florida 34102.

ARTICLE V: MANAGEMENT

The Limited Liability Company shall be managed by one of its members and the name and address of the Managing Member is: Clifford A. Olson, at 1164 Goodlette Road, Naples, Florida 34102.

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_ day of August, 2005, by Clifford A. Olson. These Articles are executed this ___ Managing Member of Somerdale Partners, L.I.C., pursuant to the Florida Limited Liability Company Act, Florida Statute § 608.401, et seq. The execution of these Articles constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

6. Olson, Managing Member

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 AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: Somerdale Partners, L.L.C.
- 2. The name and address of the registered agent and office is: Clifford A. Olson, at 1164 Goodlette Road, 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 provided for in Chapter 608, Florida Statutes.

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