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FLORIDA/FOREIGN LIMITED LIABILITY CO.

The LJB Group, LLC

Certificate of Status	0
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FAX AUDIT #

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**ARTICLES OF ORGANIZATION
OF
The LJB Group, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **The LJB Group, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 124 Newport Lane, Ponte Vedra Beach, Florida 32082.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Larry Longhi, 124 Newport Lane, Ponte Vedra Beach, Florida 32082. Located in the County of St. Johns.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2047.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Larry Longhi, 124 Newport Lane, Ponte Vedra Beach, Florida 32082
Ben Balke, 13076 Chets Creek, Dr. S, Jacksonville, Florida 32224



Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,

Madison, WI 53717

(608) 827-5300

FAX AUDIT #

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TALLAHASSEE, FLORIDA

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FAX AUDIT # 4070000611093CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **The LJB Group, LLC**

The name and address of the registered agent and office is Larry Longhi, 124 Newport
Lane, Ponte Vedra Beach, Florida 32082. Located in the County of St. Johns.

Having been named as registered agent and to accept service of process for the above
stated 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.

Signature: Larry Longhi

Larry Longhi

Date: 3/5/2007SECRETARY OF STATE
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