

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Lowery, Lacey & Co, LLC

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<input type="checkbox"/> LTD Partnership File	
<input type="checkbox"/> Foreign Corp. File	
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<input type="checkbox"/> Fictitious Name File	
<input type="checkbox"/> Trade/Service Mark	
<input type="checkbox"/> Merger File	
<input type="checkbox"/> Art. of Amend. File	
<input type="checkbox"/> RA Resignation	
<input type="checkbox"/> Dissolution / Withdrawal	
<input type="checkbox"/> Annual Report / Reinstatement	RECEIVED 00 JUL 12 AM 10:17 DEF. IN. RE. STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA
<input checked="" type="checkbox"/> Cert. Copy	
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<input type="checkbox"/> Certificate of Good Standing	
<input type="checkbox"/> Certificate of Status	
<input type="checkbox"/> Certificate of Fictitious Name	
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<input type="checkbox"/> UCC 11 Search	
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<input type="checkbox"/> Courier	

Signature

Requested by:

Name

Date

Time

Walk-In

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**ARTICLES OF ORGANIZATION
OF
LOWERY, LACEY & LE, L.L.C.**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be **LOWERY, LACEY & LE, L.L.C.**, ("Limited Liability Company").

ARTICLE II - DURATION

This Limited Liability Company shall commence its existence on the date of filing these Articles of Organization and shall exist perpetually thereafter unless sooner dissolved according to law.

ARTICLE III - PURPOSES AND POWERS

The general nature of the business or businesses to be transacted and which this Limited Liability Company is authorized to transact, in addition to those authorized by the laws of the State of Florida, and the powers of the Limited Liability Company, shall be as follows:

1. To purchase or otherwise acquire, undertake, carry on, improve, or develop, all or any of the business, goodwill, rights, assets, and liabilities of any person, firm, association, or corporation carrying on any kind of business of a similar nature to that which this limited liability company is authorized to conduct, pursuant to the provisions of these Articles of Organization, and to hold, utilize, and in any manner dispose of the rights and property do acquire.
2. To enter into and make all contracts for its business deemed necessary and appropriate but not contrary to law with any person, entity, partnership, association, corporation, domestic or foreign, or of any domestic or foreign state, government, or governmental authority, or of any political or administrative subdivision, or department thereof, and to perform and carry out, assign, cancel, modify, terminate, amend or rescind any of such contracts.

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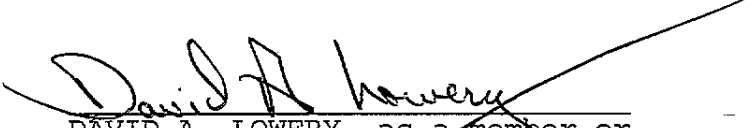
ARTICLE V - PRINCIPAL OFFICE

The mailing address and the street address of the principal office of this Limited Liability Company shall be 1743 Northgate Blvd., Sarasota, Florida 34234.

ARTICLE VI - MANAGEMENT

This Limited Liability Company shall be managed by one or more managers and is, therefore, a manager-managed company. A member may also be a manager of this Limited Liability Company.

IN WITNESS WHEREOF, the undersigned organizers have made and subscribed these Articles of Organization at Sarasota County, Florida, for the foregoing uses and purposes this 11 day of July, 2000.


DAVID A. LOWERY, as a member or authorized representative of this Limited Liability Company

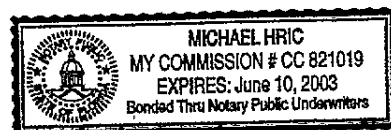
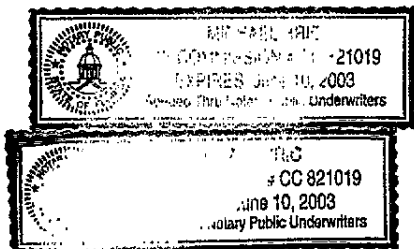
STATE OF FLORIDA
COUNTY OF SARASOTA

Before me personally appeared DAVID A. LOWERY, to me personally known or who has produced _____ as identification, to be one of the organizers of the above limited liability company and who subscribed the above Articles of Organization, and he freely and voluntarily acknowledged before me according to law that he made the same for the uses and purposes mentioned and set forth in it and who did/did not take an oath.

IN WITNESS WHEREOF, I have set my hand and affixed my official seal this 11th day of July, 2000.


NOTARY PUBLIC

Name Printed: MICHAEL HRIC
My Commission Expires: 6-10-03
Commission No.: 01-821019



CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

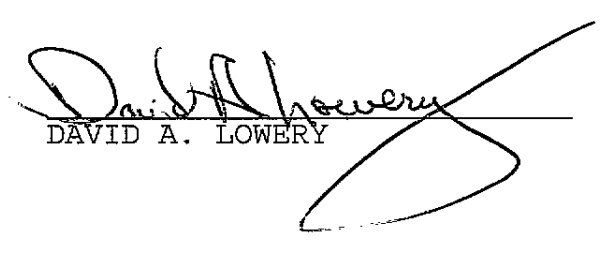
PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is
LOWERY, LACEY & LE, L.L.C.

2. The name and address of the registered agent
and office is:

David A. Lowery
1743 Northgate Blvd.
Sarasota, Florida 34234

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.



DAVID A. LOWERY

DATE

July 11, 2000