

L00000008436

Florida Department of State
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To: Division of Corporations
Fax Number : (850) 922-4003

From: GAIL S. ANDRE'

ATTY NO. 015 Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.
CLIENT NO. 015222 Account Number : 072720000036
MATTER NO. 75283 Phone : (407) 843-4600
Fax Number : (407) 843-4444

PLEASE ARRANGE FILING OF THE ARTICLES OF ORGANIZATION WITH AN EFFECTIVE DATE OF TODAY, JULY 18, 2000, AND RETURN TO ME A CERTIFICATION AS SOON AS POSSIBLE. THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER.

LIMITED LIABILITY COMPANY

MICHAEL CURRAN LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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7/18
[Handwritten signatures and initials]

ARTICLES OF ORGANIZATION

OF

MICHAEL CURRAN LLC

ARTICLE I - NAME

The name of this limited liability company is MICHAEL CURRAN LLC (the "Company").


ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is
Encosta Do Lago, Quinta Da Lago 8135, Almancil, Portugal.

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ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 N. Eola Drive, Orlando, Florida 32801 and the name of the initial registered agent of the Company at that address is Michael Ryan.


Signature of an Authorized Representative of a Member

Michael Ryan
Typed or Printed Name of Signer

ACCEPTANCE OF REGISTERED AGENT

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 as provided for in Chapter 608, Florida Statutes.


Michael Ryan