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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	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 Fictitious Name Corp Record Search Officer Search Fictitious Owner Search Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval Courier



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 7, 2000

CAPITAL CONNECTION

SUBJECT: ECSTASEA

Ref. Number: W00000021870

We have received your document for ECSTASEA and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following:

Please list a suffix in Article I of the document.

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6025.

Trevor Brumbley Document Specialist

Letter Number: 300A00047519

FILED OUSEP -0 MHII: 4.6



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 6, 2000

CAPITAL CONNECTION

SUBJECT: ECSTASEA

Ref. Number: W00000021870

We have received your document for ECSTASEA and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following:

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Trevor Brumbley Document Specialist

Letter Number: 000A00047257

ARTICLES OF ORGANIZATION OF ECSTASEA, LLC

ARTICLE I NAME

The name of this Limited Liability Company shall be ECSTASEA, LLC

ARTICLE II PRINCIPAL PLACE OF BUSINESS

The principal place of business of the Company shall be SEASIDE, FLORIDA, and such other place or places as the member from time to time may determine. The mailing address of the Company is 3681 N.E. 7TH STREET, OCALA, FLORIDA 34470.

ARTICLE III INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The initial registered agent of the Company shall be DEBORAH LYNN USHER. The address of the initial registered agent is 3681 N.E. 7TH STREET, OCALA, FLORIDA 34470.

<u>ARTICLE IV</u> MANAGEMENT

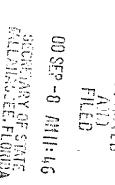
The Company will be a manager-managed company, and will be managed by a manager or managers who may be, but are not required to be, a member of the Company. The name and address of the manager who will serve as manager until the first annual meeting of members or until his successor is selected and qualified in accordance with the Operating Agreement or applicable law is:

REGGIO - 9724 DART STREET, RIVER RIDGE, LA 70123

THOMAS - 1301 SW 43RD PLACE, OCALA, FL 34474

USHER 1-3681 N.E. 7TH STREET OCALA, FL. 34470

USHER 2 - 3681 N.E. 7TH STREET OCALA, FL. 34470



be executed on the day of	ersigned have caused these Articles of Organization to 2000, effective upon filing same with the
Florida Department of State. BY:	ECSTASEA LLC Member (or Authorized Representative)
STATE OF FLORIDA)) SS: COUNTY OF MARION)	
by DEBQRAH LYNN USHER, who die member, (who is personally kn	owledged before me this 5 day of 50, 2000, dexecute the foregoing Articles of Organization as sown to me, or who have produced as identification, and being first duly
sworn, acknowledged before me that they extherein expressed.	Signature - NOTARY PUBLIC
MELODEE HICKS COMMISSION # CC792367 CFEVERES NOVEMBER 22, 2002	Meladee Hicks Printed Name of NOTARY PUBLIC
	Commission Number

AFFILED FILED

OUSEP -8 MIII: 46

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT DESIGNATING ITS REGISTERED OFFICE AND REGISTERED AGENT IN FLORIDA.

1. The name of the limited liability company is:

ECSTASEA, L.L.C.

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

DEBORAH LYNN USHER 3681 N.E. 7TH STREET OCALA, FLORIDA 34470

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 RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE DUTIES AND OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

By: MUNUTI //YIN DEBORAH I VNN IMHEI

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