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A. H. LANE (RETIRED)

September 11, 2000

VIA FEDERAL EXPRESS

Florida Secretary of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32314

000003391680--0
-09/13/00--01057--003
***133.75 ***130.00

Re: McComco, L.L.C., a Florida Limited Liability Company

Ladies and Gentlemen:

Enclosed please find the original and a duplicate of the following documents for the formation of the above named Florida Limited Liability Company:

1. The duly executed Articles Of Organization For A Florida Limited Liability Company; and
2. The duly executed Certificate Of Designation Of Registered Agent/Registered Office.

Our search of the Secretary of State's On-Line Records indicates that the aforesaid name is available for a Florida Limited Liability Company. After examination, please file the original of the Articles Of Organization and then furnish to the undersigned a Certificate Of Organization with respect to the above named Limited Liability Company.

Next, enclosed please find this Firm's check in the amount of \$133.75 to cover the filing fee for the Articles Of Organization in the amount of \$100.00, the filing fee for the Certificate Of Designation Registered Agent/Registered Office in the amount of \$25.00 and the fee for furnishing a certified copy in the amount of \$8.75.

If there are any questions concerning any of the foregoing, it would be greatly appreciated if you would telephone the undersigned collect at (863) 284-2213.

Thanking you for your usual cooperation, I am

Yours very truly

Robert J. Bertrand

RJB/mcd

Enclosures

xc: McComco, L.L.C.
John K. Vreeland, Esquire

LANE, TROHN, BERTRAND & VREELAND, P.A.

ONE LAKE MORTON DRIVE • P.O. BOX 3 • LAKELAND, FLORIDA 33802-0003 • PHONE (863) 284-2200 • FAX (863) 688-0310
WWW.LANETROHN.COM

ARTICLES OF ORGANIZATION

OF

McCOMCO, L.L.C

The undersigned hereby presents these Articles of Organization for the formation of a Limited Liability Company pursuant to the Florida Limited Liability Company Act.

ARTICLE I.

NAME

The name of the Limited Liability Company is McCOMCO, L.L.C.

ARTICLE II.

PRINCIPAL OFFICE

The mailing address and the street address of the principal office of the Limited Liability Company is 2605 Jonila Avenue, Lakeland, Florida 33803.

ARTICLE III.

DURATION

The Limited Liability Company shall have perpetual existence, commencing on the date of the execution and acknowledgment of these Articles of Organization.

ARTICLE IV.

PURPOSE

The Limited Liability Company is organized for the purpose of transacting ~~any~~ and all lawful business.

FILED
00 SEP 13 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V.
MEMBERSHIP INTERSTS

The Limited Liability Company shall be authorized to issue Membership Interests, divided into Class A Membership Interests and Class B Membership Interests. The Class A Membership Interests shall be divided into one thousand (1,000) units and the Class B Membership Interests shall be divided into ninety-nine thousand (99,000) units.

The Class A Membership Interests and the Class B Membership Interests shall each have the same preferences, limitations and relative rights with the sole exception that only units of the Class A Membership Interests shall have voting rights and no units of the Class B Membership Interests shall have voting rights. The holders of units of the Class B Membership Interests shall not be entitled to notice of any meetings of the members and shall not be entitled to vote upon any matter whatsoever which may be presented and decided upon at any meeting of the members. However, the record holders of units of the Class B Membership Interests shall be entitled to participate, on a unit for unit basis, with the record holders of units of the Class A Membership Interests in any distributions whatsoever, including any distributions in liquidation, which hereafter may be declared and paid or otherwise made by the Limited Liability Company.

ARTICLE VI.
MANAGEMENT

The Limited Liability Company is to be a manager-managed company.

ARTICLE VII.
INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT

The street address of the initial registered office of the Limited Liability Company is

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00 SEP 13 PM 5:00
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TALLAHASSEE, FLORIDA

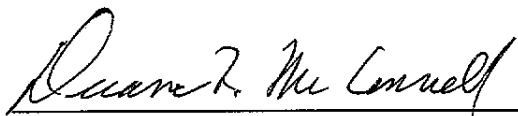
2605 Jonila Avenue, Lakeland, Florida 33803 and the name of the initial registered agent of the Limited Liability Company at that office is Duane F. McConnell.

ARTICLE VIII.

INDEMNIFICATION


Except to the extent otherwise provided in the Operating Agreement of the Limited Liability Company, the Limited Liability Company shall indemnify each person or entity who was or is a Member, director, officer, employee or agent of the Limited Liability Company to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned who will be a Member of the Limited Liability Company, has executed these Articles of Organization this 11th day of September, 2000.

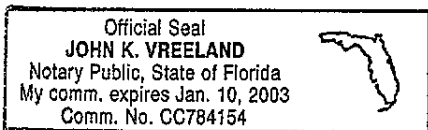

DUANE F. McCONNELL, Member

STATE OF FLORIDA
COUNTY OF POLK

The foregoing Articles Of Organization were acknowledged before me this 11th day of September, 2000, by DUANE F. McCONNELL.


NOTARY PUBLIC, State of Florida at Large
JOHN K. VREELAND
(Printed Name)
My commission expires: _____
My commission number: _____

(AFFIX NOTARY SEAL)



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00 SEP 13 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION

OF

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 AND SECTION 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: McCOMCO, L.L.C.
2. The name and street address of its initial registered agent and initial registered office are:

Initial Registered Agent

Duane F. McConnell

Initial Registered Office

2605 Jonila Avenue
Lakeland, Florida 33803

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.


DUANE F. McCONNELL

Date: 9/16

FILED
008 SEP 13 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA