



ACCOUNT NO. : 072100000032

REFERENCE : 082255 80523A

AUTHORIZATION : *Patricia Poyt*

COST LIMIT : \$ 155.00

ORDER DATE : March 19, 2001

ORDER TIME : 12:54 PM

ORDER NO. : 082255-005

600003878186--4

CUSTOMER NO: 80523A

CUSTOMER: Patricia Lazare, Legal Asst
Donahoo Ball & Mcmenamy, P.a.
2925 Barnett Center
50 North Laura Street
Jacksonville, FL 32202

DOMESTIC FILING

NAME: EAR2EAR JAX, LLC

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cindy Harris - EXT. 1137

EXAMINER'S INITIALS:

RECEIVED
01 MAR 19 PM 3:10
DIVISION OF CORPORATION

FILED
01 MAR 19 PM 3:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA

WL 3/19

41

WL

ARTICLES OF ORGANIZATION

OF

EAR2EAR JAX, LLC

The undersigned authorized representative hereby executes these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

ARTICLE 1. NAME

The name of this limited liability company is EAR2EAR JAX, LLC.

ARTICLE 2. ADDRESS

The mailing address and the street address of the principal office of the limited liability company are 1361 13th Avenue South, Jacksonville Beach, Florida 32250.

ARTICLE 3. DURATION

This limited liability company is to exist perpetually.

ARTICLE 4. PURPOSE

This limited liability company is organized for the purpose of transacting any and all lawful business for which limited liability companies may be organized under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, 1997, as amended.

ARTICLE 5. MANAGEMENT

This limited liability company is to be managed by the members and the name and address of the managing member are:

NAME

Wendi L. Fraker

ADDRESS

822 Chicopit Lane
Jacksonville, Florida 32224

ARTICLE 6. ADMISSION OF ADDITIONAL MEMBERS

No person may be admitted as an additional member of this limited liability company unless each member consents in writing to the admission of the additional member.

FILED
MAR 19 PM 3:27
CLERK OF STATE
TALLAHASSEE FLORIDA

William B. McMenemy

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

William B. McMenemy, Authorized Representative

IN WITNESS WHEREOF, I, the undersigned authorized representative, have hereunto set my hand and seal this 16TH day of March, 2001, for the purpose of forming this limited liability company under the laws of the State of Florida, and I hereby make and file in the office of the Secretary of the State of Florida, these Articles of Organization and certify that the facts herein stated are true.

William B. McMenemy
WILLIAM B. MCMENAMY

FILED
01 MAR 19 PM 3:28
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

STATE OF FLORIDA
COUNTY OF DUVAL

SUBSCRIBED, SWORN AND ACKNOWLEDGED to before me by WILLIAM B. McMENAMY, who is (X) personally known to me or () has produced _____ as identification, this 16TH day of March, 2001.

Patricia Lazare

Notary Public, State of
Florida at Large

(*Patricia Lazare*)
Print name below signature

My Commission Expires:

My Commission Number:



Patricia Lazare
MY COMMISSION # CC832636 EXPIRES
May 3, 2003
BONDED THRU TROY FAIR INSURANCE, INC.

**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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is EAR2EAR JAX, LLC

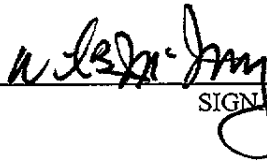
2. The name and the Florida street address of the registered agent are:

William B. McMenamy
Name

50 N. Laura Street, Suite 2925
Florida street address (P.O. Box NOT ACCEPTABLE)

Jacksonville, FL 32202
CITY, STATE AND ZIP

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.



SIGNATURE

FILED
01 MAR 19 PM 3:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA