

L010000006115



ACCOUNT NO. : 072100000032

REFERENCE : 122646 4325458

AUTHORIZATION :

COST LIMIT : \$ ~~125.00~~ Prepaid

ORDER DATE : April 20, 2001

ORDER TIME : 10:39 AM

ORDER NO. : 122646-005

CUSTOMER NO: 4325458

CUSTOMER: Robert S. Rubin, Esq  
Cohen Todd Kite & Stanford

16th Floor  
525 Vine Street  
Cincinnati, OH 452023124

600004035726--5  
-04/20/01--01084--002  
\*\*\*\*125.00 \*\*\*\*125.00

DOMESTIC FILING

NAME: CARSON FAMILY, LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX \_\_\_\_ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sandra Mathis - EXT. 1165

EXAMINER'S INITIALS:

APPROVED  
AND  
FILED

01 APR 20 PM 12:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

01 APR 20 AM 11:39  
DIVISION OF CORPORATION

4-20-01

**ARTICLES OF ORGANIZATION  
OF  
CARSON FAMILY, LLC**

**ARTICLE I  
NAME**

The name of the Limited Liability Company is Carson Family, LLC.

**ARTICLE II  
ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is:

c/o Franklin Carson  
Suite 305  
Tampa Bay Marina Center  
205 South Hoover Street  
Tampa, FL 33609

**ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT'S SIGNATURE**


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

Franklin Carson  
Suite 305  
Tampa Bay Marina Center  
205 South Hoover Street  
Tampa, FL 33609

01 APR 20 PM 12:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

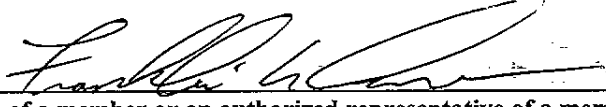
APPROVED  
AND  
FILED

*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, F.S.*

  
\_\_\_\_\_  
Registered Agent's Signature

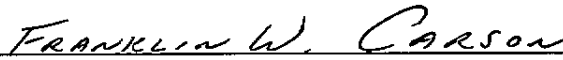
**ARTICLE IV  
MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.



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

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



Typed or printed name of signee

APPROVED  
AND  
FILED

01 APR 20 PM 12:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA