

AUG-02-2001 15:16

MCCARTHY SUMMERS

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Florida Department of State

Division of Corporations

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Account Name : MCCARTHY, SUMMERS, BOBKO, WOOD, SAWYER & PERRY, P.A.  
Account Number : I19990000170  
Phone : (561) 286-1700  
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LIMITED LIABILITY COMPANY

TAES, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 1        |
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MCCARTHY SUMMERS

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P.01



**FLORIDA DEPARTMENT OF STATE**  
**Katherine Harris**  
**Secretary of State**

August 3, 2001

MCCARTHY, SUMMERS ET AL.

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**ARTICLES OF ORGANIZATION  
OF  
TAES, LLC**

**ARTICLE I**

**Name**

The name of the Limited Liability Company is:

**TAES, LLC**

**ARTICLE II**

**Address**

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

528 NE Alice Street  
Stuart, Florida 34996

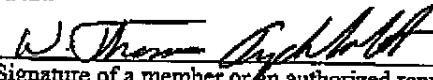
**ARTICLE III**

**Registered Agent**

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

W. Thomas Aydelotte  
528 NE Alice Street  
Stuart, Florida 34996

*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..*

  
\_\_\_\_\_  
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.)

**W. Thomas Aydelotte**  
Typed or printed name of signee

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