(MON) 9.17'01 17:33/ST.17:32/NO.4861814419

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type file fa audit number (shown below) on the top and bottom of all pages of the document.

(((H01000100399 4)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

ALI

From:

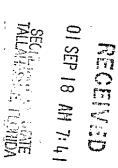
Account Name : FOLEY & LARDNER OF TAMPA

Account Number: 071344001620 Phone : (813)229-2300 Fax Number : (813)221-4210

LIMITED LIABILITY COMPANY

Financial Center Leasing, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00



(((H01000100399 4)))

ARTICLES OF ORGANIZATION

FINANCIAL CENTER LEASING, LLC

ARTICLE I Name

The name of the limited liability company is FINANCIAL CENTER LEASING, LLC (the "Company").

ARTICLE II Address

The mailing address and street address of the principal office of the Company is 7650 Courtney Campbell Causeway, Suite 1120, Tampa, Florida 33607.

ARTICLE III Registered Agent

The name and street address of the initial registered agent of the Company is William A. Krusen, Jr., and the street address of the initial registered agent is 7650 Courtney Campbell Causeway, Suite 1120, Tampa, Florida 33607.

ARTICLE IV Management

The Company is a member-managed company.

IN WITNESS WHEREOF, these Articles of Organization have been executed by the undersigned member on behalf of the Company on this 15 day of Accest, 2001.

William A. Krusen. Member

Lewis II. Hill, III, Esq. Florida Bar No.: 036020 Foley & Lardner 100 N. Tampa Street Suite 2700 Flampa, Florida 33601 (813) 225-4111

(((H01000100399 4)))

CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED 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:		
	FINANCIAL CENTER LEASING, LLC		
2.	The name and the Florida street address of the registered agent and office arc:	_	≓
	William A. Krusen, Jr.		L SHOW
	(Name)	_ 	AHA AHA
	7650 Courtney Campbell Causeway, Suite 1120	- SEP	SSEI
	Florida street address (P.O. Box NOT ACCEPTABLE)	- P	프
	Tampa, Florida 33607	w	FLORIDA
	City/State/Zip		> Or
appo with duties	ng been named as registered agent and to accept service of process for the above ed liability company at the place designated in this certificate, I hereby accintment as registered agent and agree to act in this capacity. I further agree to the provisions of all statutes relating to the proper and complete performances, and I am familiar with and accept the obligations of my position as registered added for in Chapter 608, F.S.	cept the	e y
	Walling		
	(Signature)		