

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

200004610202--4 -09/25/01--01053--002 ****125.00 ****125.00

RE: Articles of Organization For Florida Limited Liability Company Gooding LLC

Dear Sirs:

W01-22474

Enclosed find the Articles of Organization for Florida Limited Liability Company

indicating Donald Gooding as the Registered Agent.

If any questions please contact:

Virginia Capital Management Rudolph Masters Jr. 806 Newtown Road Virginia Beach, Virginia 23462 FAX Number (757) 519-9576 Telephone Number (757) 519-9665

Sincerely Yours,

Xenia W. Gooding

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DIVISION OF CORPORATION

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 27, 2001

RUDOLPH MASTERS JR.
VIRGINIA CAPITAL MANAGEMENT GROUP
806 NEWTOWN ROAD
VIRGINIA BEACH, FL 23462

SUBJECT: GOODING, LLC Ref. Number: W01000022474

We have received your document for GOODING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 301A00053833

SECRETARY OF SIALIBRE DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

GOODING, LLC

ARTICLE II - Address:

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

806 Newtown Road

Virginia Beach, Virginia 23462 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Donald Gooding			
Name			
1738 Primrose Lar Florida street address (P	ne .O. Box <u>NOT</u> acceptable)	<u>.</u>	SECRETA ISION OF NOV6
Wellington City, Sta	FL 33414 te, and Zip	· · -	RY OF ST CORPORT

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.

Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

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

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)