

Division of Corporations

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L01000020808**Florida Department of State**

Division of Corporations

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Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : FLORIDA & OFFSHORE BUSINESS FORMATION, INC.

Account Number : I20010000099

Phone : (775)884-1357

Fax Number : (775)882-6818

AL**LIMITED LIABILITY COMPANY****Geneva Sheridan, LLC**

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|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | or 2 |
| Estimated Charge | \$130.00 |

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ARTICLES OF ORGANIZATION OF
Geneva Sheridan, LLC
A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

Name

The name of the Limited Liability Company is: Geneva Sheridan, LLC

ARTICLE II

Address

The mailing address and street address of the principal office of the Limited Liability Company is: 22331 Powell Road, Brooksville, FL 34602.

ARTICLE III

Registered Agent

The name of the initial resident agent and the initial address of the registered office where process may be served in the State of Florida is: Thomas. S. Hogan, Jr., The Hogan Law Firm, 20 S. Broad Street, Brooksville, FL 34601.

ARTICLE IV

Management

The Limited Liability Company is to be managed by members and the names and addresses of such members are: Thomas S. Hogan and Mindy Watkins, 20 South Broad Street, Brooksville, FL 34605.

ARTICLE V

Admission of Additional Members

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be: limited as more particularly described in the Operating Agreement of the Company

J. H. HOGAN
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VI

Members Rights to Continue Business

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: limited as more particularly described in the Operating Agreement of the Company

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

Signature of authorized representative or member



Sandra L. Miller Organizer

Dated: 3 December 2001

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the company is: Geneva Sheridan, LLC
2. The name and address of the registered agent and office is:

Thomas S. Hogan, Jr.
20 S. Broad Street
Brooksville, FL 34601

Having been named as registered agent and to accept service of process for the above stated 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.

Thomas S. Hogan Jr.

Dated December 3, 2001