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DEC 31 PM 5:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 537082 7228547

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : December 27, 2001

ORDER TIME : 3:35 PM

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ORDER NO. : 537082-005

CUSTOMER NO: 7228547

CUSTOMER: Mr. Jeff Tabor  
Mr. Jeff Tabor

3750 East Florida Ave.  
Suite D  
Hemet, CA 92544

DOMESTIC FILING

NAME: WYN WYN, 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: Deborah Schroder - EXT. 1118  
EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
01 DEC 31 PM 4:40  
DIVISION OF CORPORATION

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

WYN WYN, LLC

## ARTICLE II - Address:

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

309 ROYAL TERN ROAD, S., PONTE VEDRA BEACH, FLORIDA 32082

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

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

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee FL 32301

City, State, and Zip

*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.*

Corporation Service Company

By:

*Lynette Coleman*

Registered Agent's Signature

## 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)

*Lynette Coleman*  
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.)

LYNETTE COLEMAN, AS AUTHORIZED AGENT

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)

MANAGING MEMBERS

OF

WYN WYN, LLC

Patricia Anne Williams      Managing Member  
309 Royal Tern Road, S.  
Ponte Vedra Beach, FL 32082

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Das

## LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of WYN WYN, LLC, a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this      day of

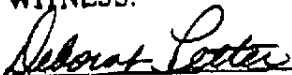


Signature

JEFF TABOR

Print Name of Signer

WITNESS:

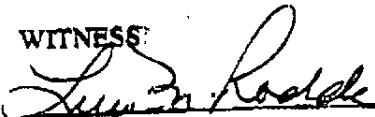


Signature

Deborah Petter

Print Name of Witness

WITNESS:



Signature

Lura M. Boddie

Print Name of Witness