

CORPORATE
ACCESS,
INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 Fax (850) 222-1666

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1.) Okeechobee Prairie, L.L.C.
(CORPORATE NAME & DOCUMENT #)

2.)
(CORPORATE NAME & DOCUMENT #)

3.)
(CORPORATE NAME & DOCUMENT #)

4.)
(CORPORATE NAME & DOCUMENT #)

5.)
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

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DIVISION OF CORPORATION

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Professional Limited Liability Company is:

OKEECHOBEE PRAIRIE, L.L.C.

ARTICLE II - Purpose:

The purpose of the Professional Limited Liability Company is to render professional services as any lawful purpose in accordance with the Laws of the State of Florida and to transact such other business as may be lawful.

ARTICLE III - Address:

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

315 5th Street
West Palm Beach, Florida 33401

ARTICLE IV - Duration:

The period of duration for the Professional Limited Liability Company shall be perpetual.

ARTICLE V - Management:

The Professional Limited Liability Company is to be managed by a manager or managers who shall be elected as provided in the Regulations. The initial manager is:

Albert J. Gamot, Jr.
315 5th Street
West Palm Beach, Florida 33401

ARTICLE VI - Members Right to Continue Business:

The remaining members of the Professional Limited Liability Company, may be a majority vote, as provided in the Regulations, elect to continue the business of the professional limited liability company 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 professional limited liability company.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE
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Albert J. Gamot, Jr.
Signature of member or an authorized representative of a member

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

ALBERT J. GAMOT, JR.
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**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 TO DESIGNATE A REGISTERED AGENT IN THE STATE OF FLORIDA

1. The name of the limited liability company is: Okeechobee Prairie, L.L.C.
2. The name and the Florida address of the registered agent is:

Albert J. Gamot, Jr.
315 5th Street
West Palm Beach, Florida 33401

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. If 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.


Signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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