ALFRED O. SHULER J. GORDON SHULER THOMAS M. SHULER APALACHICOLA, FLORIDA 32329

February 26, 2002

TELEPHONE: (850) 653-9226 FACSIMILE: (850) 653-3382

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

500005027055--3 -02/28/02--01061--005 ****125.00 ****125.00

Re:

Coastal Connection, LLC

Dear Sir/Madam:

L02-5132

Enclosed you will find the Articles of Organization for Coastal Connection, LLC. You will also find a check in the amount of \$125.00 for your filing fee.

Thank you and if you should need any additional information please call.

Sincerely,

Thomas M. Shuler

TMS:mm

Enc: As Stated

02 FFR 28 1M 9: L3

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Coastal Connection, LLC

ARTICLE II - Address:

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

78-12th Street Apalachicola, Florida 32320

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

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

Thomas M. Shuler	
Name 34-4th Street	
Florida street address (P.O. Box NOT acceptable)	<u> </u>
Apalachicola FL 32320	
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..

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 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.)

Thomas M. Shuler
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)