102000008/09

From the Desk ob

Minnie Donovan

To Whom it may concern,

I would like to have all completed forms sent back to me at my office. My address is

Donovaris Tax Service

P.O. Box 1492 Hanribal, Mo. 63401 573-221-2245

Cordially Yours, Minnie S. Donovan



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 20, 2002

DONOVAN'S TAX SERVICE PO BOX 1492 HANNIBAL, MO 63401

SUBJECT: DIXON'S LINES L.L.C. Ref. Number: W02000007775

We have received your document for DIXON'S LINES L.L.C. and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The total fee due is \$125, as shown at the bottom of your document. Please submit an additional \$25. Also, please label the attachment "Article V" and put the name of the LLC on the attachment.

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: 502A00016705

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: DIXON'S LINES L.L.C.

ARTICLE II - Address:

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

20801 BISCAYNE BLVD, SUITE # 506

NORTH MIAMI BEACH, FL 33180 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

RUSSELL DIXON

Name

20801 BISCAYNE BLVD SUITE # 506

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

NORTH MIAMI BEACH FL 33180

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 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.)

RUSSELL DIXON

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)

ARTICLE V

DIXON'S LINES LLC

At such time the LLC shall dissolve any and all equipment, assets, and other property brought into the LLC by any member shall revert back to said member. Any and all equipment, assets, and other property bought by the LLC and on 1120 Balance Sheet shall revert back to the original organizer of the LLC.

The LLC shall establish and maintain a fund to provide pension for the benefit of the employees, directors, officers, and their dependents, and to establish and contribute to group life and health insurance plans for the benefit of employees, directors, officers, and their dependents, and to provide medical reimbursement plans for certain management personnel.

New members shall be admitted to the LLC upon approval of original members.

SECRETARY OF STATES