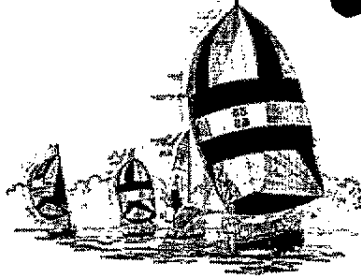


LD2000008527



THE PORTER GROUP, L.L.C.

DATE: THURSDAY, APRIL 04, 2002
TO: REGISTRATION SECTION
DIVISION OF CORPORATIONS
POST OFFICE BOX 6327
TALLAHASSEE, FL 32314
FROM: BRUCE PORTER, MEMBER - THE PORTER GROUP, L.L.C.
RE: ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

100005206501--7
-04/09/02--01010--002
****125.00 ****125.00

NAME: Bruce R. Porter
Address: 4234 S.E. 10th Place
Ocala, Fl 34471

Daytime phone: 352-624-0011
Cell: 352-208-5332

FEI Number: 74-3035884

APPROVE
AND
FILED
02 APR - 8 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1
JB
4-10-02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The PORTER GROUP, L.L.C.

ARTICLE II - Address:

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

4234 S.E. 10th PLACE OCALA, FL 34471

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

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

BRUCE ROBERT PORTER

Name

4234 S.E. 10th PLACE

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

OCALA

FL

34471

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.

Bruce Robert Porter

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)

Bruce Robert Porter

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.)

BRUCE ROBERT PORTER

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)

02 APR - 8 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED