L020000/357/

P. O. BOX 15361 Tallahassee, FL 32317-5361 (904) 668-1069

June 3, 2002

Department of State
Division of Corporations
P. O. BOX 6327
Tallahassee, FL 32314

Re: Formation of TUSKAWILLA PROFESSIONAL OFFICES, L

Dear Sir:

Enclosed is one (1) original and one (1) copy of the Articles of Organization for the above referenced Limite Liability Company.

Also enclosed are the following filing fees:

\$100.00	Filing Fee for Articles of Organization	¥
25.00	Designation of Registered Agent	
30.00	Certified Copy	
5.00	Certificate of Status	
	وسيد وسيد وسيد وسيد وسيد وسيد وسيد	

\$160.00 Total Remittance

000005677420--1 -06/04/02--01021--012 ****160.00 ****160.00

Please return an original filed copy of the Articles of Organization and Certificate of Status to the above address.

Your attention to this matter is appreciated.

Sincerely,

J. H. Kuhlmann

L02-13571 Ge

RECEIVED

62,11W-4 AMIO: 57

. I I I I I

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TUSKAWILLA PROFESSIONAL OFFICES, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act., F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - Name:

The name of the Limited Liability Company is:

TUSKAWILLA PROFESSIONAL OFFICES, LLC.

ARTICLE II - Address:

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

Mailing:

Street:

P.O. Box 15361

2684 Wharton Circle

Tallahassee, FL 32317-5361

Tallahassee, FL 32312

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

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

J. H. Kuhlmann 2684 Wharton Circle Tallahassee, FL 32312

Article IV - Management (Check box if applicable.)

X The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.

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.

J. H. Kuhlmann

The foregoing instrument was acknowledged before me this ______3 ____ day of June, 2002 by _J. H. Kuhlmann who is personally known to me or who has produced his FLORIDA DRIVER'S LICENSE as identification.

(SEAL)

Printed Name: 9/12/05

NOTARY PUBLIC

My Commission Expires:

Acceptance of Registered Agent

EXPIRES: September 18, 2005

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

J. H. Kuhlmann

ECHETARY OF STATE