

06/27/02 THU 6:55 AM

Division of Corporations

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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850) 205-0383

From: **GAIL ANDRE**  
Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.  
Account Number : 072720000036  
Phone : (407) 843-4600  
Fax Number : (407) 843-4444

**PLEASE ARRANGE FILING OF THE ATTACHED ARTICLES OF ORGANIZATION TODAY AND RETURN TO ME A CERTIFICATION TO ME AS SOON AS POSSIBLE. THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER.**

**LIMITED LIABILITY COMPANY**

**ALTA VENTURES LLC**

Certificate of Status	0
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**ARTICLES OF ORGANIZATION  
OF  
ALTA VENTURES LLC**

**ARTICLE I - NAME**

The name of this limited liability company is ALTA VENTURES LLC (the "Company").

**ARTICLE II - PRINCIPAL OFFICE**

The mailing and street address of the principal office of the Company is 121 Springwind Way, Casselberry, Florida 32707.

**ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the Company is 322 East Central Boulevard, Suite 1010, Orlando, Florida 32801, and the name of the initial registered agent of the Company at that address is Truong M. Nguyen.

**ARTICLE IV - MANAGEMENT**

The Company is to be managed by members of the Company and is, therefore, a member-managed company.

  
Signature of an Authorized Representative of a Member

Truong M. Nguyen  
Typed or Printed Name of Signer

**ACCEPTANCE OF REGISTERED AGENT**

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, Florida Statutes.

  
Truong M. Nguyen