

Division of Corporations
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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : PAUL SMITH Account Number : I20010000247

hone : (305) 673-0347

Fax Number : (305)532-0738

02 JUL -2 PM 4: 57

LIMITED LIABILITY COMPANY

American Capital Ventures, L.L.C.

| Certificate of Status | 0 |
|-----------------------|-------------|
| Certified Copy | 0 |
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7/2/2002

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

ARTICLE! NAME

The name of the Limited Liability Company is: . .

American Capital Ventures, L.L.C.

ARTICLE II ADDRESS

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

16466 BrookfiesId Estates Way

Delray Beach, Florida 33446

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REIGSTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are: A1A CORPORATE SERVICES INC.

218 SOUTHERN COUNTRY LANE

QUINCY, FL 32351

Having been named as registered agent 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

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

bul Smith Vice President

ARTICLE V MEMBERS (optional)

Member:

Francine Brooks

16466 Brookfield Estates Way

Delray Beach , Florida 33446

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ARTICLE VI MANAGERS (optional)

President: Francine Brooks 16466 Brookfield Estates Way Delray Beach, Florida 33446

Secretary, Treasurer: Alan Brooks 16466 Brookfield Estates Way Delray Beach, Florida 33446

Wand Smith PAUL STITH, VICE PRESIDENT

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.

Paul Smith

Typed or printed name of signee

