P.O. Box 381971 Jacksonville, Fl 32238

July 3, 2002

900006237039--1 -07/08/02--01012--018 ****155.00 ****155.00

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

BK

Gentlemen:

Enclosed please find Articles of Organization for Florida Limited Liability Company for Betty Ward Sales, LLC.

Also enclosed is a check payable to the Florida Department of Revenue in the amount of 155.00. to be applied as follows:

100.00 Filing fee for Articles of Organization

25.00 Designation of Registered Agent

30.00 Certified copy

The registered agent will be:

Elizabeth R. Ward 5117 Sanibel Drove. Jacksonville, Fl 32210

02 JUL -5 PN 9: 26
SECRETARY OF STATE
TALLAHASSEE FLOOR

Sincerely,

Betty Ward

Betty Ward

ARTICLE I - Name:						1
The name of the Limited Li	ability Company is:					
Betty WAR	D SAKS, LL	C				
ARTICLE II - Address:						
The mailing address and str	eet address of the pri	ncipal of	ffice of the Li	mited Liabil	ity Comp	any is
P. O. Box 3: 5117 Sanibel DR	3197/ Jack ive, Jacksonville	SONY,	11e F1 32210	32238		=
ARTICLE III - Registere	d Agent, Registered	Office,	& Registered	Agent's Si	gnature:	
The name and the Florida s	treet address of the re	gistered	agent are:		SE	22
	ElizAbeth	R.	WARd			E .
4		Name				_

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.

Jacksonu, le FL City, State, and Zip

Elizabeth R Ward

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.)

ELiZAbeth R. WARD
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)