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CORPORATION(S) NAME

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( ) Profit	() Amendment	() Merger
() Nonprofit	.,	3 7
() Foreign	() Dissolution/Withdrawal	() Mark
	() Reinstatement	
() Limited Partnership	() Annual Report	() Other
(X) LLC	() Name Registration	() Change of RA
	() Fictitious Name	() Change of RA () UCC
() Certified Copy	() Photocopies	() CUS
() Call When Ready	() Call If Problem	() After 4:30
(x) Walk In	() Will Wait	(x) Pick Up
() Mail Out	Laboratoria de la compansión de la compa	
NT	7/22/02	Order#: 5494816
Name	1122102	
Availability	•	1000065503418 -07/22/0201049019
Document Examiner		Ref#: ****125.00 *****125.00
Examiner Updater		KCIπ.
Verifier		
W.P. Verifier		Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Sunniland Gas Storage
The name of the Limited Liability Company is: Sunniland Gas Storage  Company, LLC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
Ten Thousand Memorial, Suite 530, Howton, Ex 27024
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
C T Corporation System
Name Range
1200 S Pine Island Road
Florida street address (P.O. Box NOT acceptable)
Plantation FL 33324 FL
City, State, and Zip
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
John J Linnihan, Asst. VP
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.)
Joy C. Jimerson 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)