CAPITAL CONNECTION, INC.
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

L02000021491

North Central Development LLC

200007251332--6
-08/21/02--01048--011
****155.00 ****155.00

Effective Date-
8-20-02

Signature

Requested by:
SH 8/21/02 11:10
Name Date Time

Walk-In _____ Will Pick Up _____

174 Ponder's Printing - Thomasville, GA 8/00

- ____ Art of Inc. File_____
- ____ LTD Partnership File_____
- ____ Foreign Corp. File_____
- ✓ L.C. File_____
- ____ Fictitious Name File_____
- ____ Trade/Service Mark_____
- ____ Merger File_____
- ____ Art. of Amend. File_____
- ____ RA Resignation_____
- ____ Dissolution / Withdrawal_____
- ____ Annual Report / Reinstatement_____
- ✓ Cert. Copy_____
- ____ Photo Copy_____
- ____ Certificate of Good Standing_____
- ____ Certificate of Status_____
- ____ Certificate of Fictitious Name_____
- ____ Corp Record Search_____
- ____ Officer Search_____
- ____ Fictitious Search_____
- ____ Fictitious Owner Search_____
- ____ Vehicle Search_____
- ____ Driving Record_____
- ____ UCC 1 or 3 File_____
- ____ UCC 11 Search_____
- ____ UCC 11 Retrieval_____
- ____ Courier_____

02 AUG 21 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
APPROVED AND FILED
02 AUG 21 AM 11:46
RECEIVED
DIVISION OF CORPORATIONS

8-21-02

ARTICLES OF ORGANIZATION

NORTH CENTRAL DEVELOPMENT, L.L.C.

A LIMITED LIABILITY COMPANY

(Pursuant to Chapter 608, Florida Statutes)

1. **Name.** The name of the limited liability company is North Central Development, L.L.C.

2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.

3. **Address of Principal Office.** The street address of the principal office of the limited liability company is:

5745 S.W. 75th Street, #332
Gainesville, FL 32608-5504

4. **Mailing Address.** The mailing address of the limited liability company is:

P.O. Drawer 2759
Gainesville, FL 32602

02 AUG 21 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

5. **Members at Time of Formation.** There will be at least one member at the time the limited liability company is formed.

6. **Period of Duration.** The period of duration shall be perpetual.

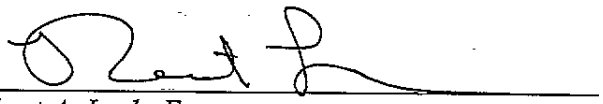
7. **Management.** Management of the Limited Liability Company at the time of formation is reserved for the initial member(s).

9. **Registered Agent, Registered Office, and Registered Agents Signature.** The name and the Florida Street address of the registered agent are::

Robert A. Lash, Esq.
500 E. University Avenue, Suite A
Gainesville, FL 32601

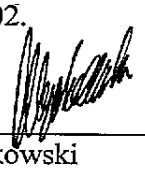
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this Certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisional of

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.



Robert A. Lash, Esq.

8. **Effective Date.** The effective date of the limited liability company shall be: August 20, 2002.



Leon Wyszkowski
Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)

APPROVED
AND
FILED

02 AUG 21 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA