

Division of Corporations

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Florida Department of State
Division of Corporations
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Account Name : FREEBORN & FREEBORN, P.A.
Account Number : 075142002301
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BK

LIMITED LIABILITY COMPANY

FCF Group, L.L.C.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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DIVISION OF CORPORATION

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**ARTICLES OF ORGANIZATION
OF
FCF GROUP, L.L.C.**

ARTICLE I

Name

The name of the limited liability company ("Company") is FCF GROUP, L.L.C.

ARTICLE II

Address

The mailing and street address of the Company's principal office is: 5719 29th Avenue South, Gulfport, Florida 33707.

ARTICLE III

Duration

The period of duration for the Company is perpetual, beginning on the date that these Articles of Organization are filed by the Florida Department of State.

ARTICLE IV

Registered Agent and Office

The name of the Company's initial registered agent in Florida is DAVID FALWELL. The address of the Company's registered office in Florida is 5119 29th Avenue South, Gulfport, Florida 33707.

ARTICLE V

Management

The Company is to be managed by three (3) managers. The initial managers will serve until the first annual meeting of the members or until the managers' successors are elected and qualified. The initial managers are identified as: David Falwell, whose address is 5119 29th Avenue South, Gulfport, Florida 33707; John Faithful, whose address is 5719 29th Avenue South, Gulfport, Florida 33707, and Diane Christman, of 5719 29th Avenue South, Gulfport, Florida 33707.

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ARTICLE VI

Admission of Additional or New Members

Members of the Company have the right to admit new members. Additional or new members may be admitted only on the unanimous written consent of the existing member or members, and the existing member or members shall determine the amount and nature of contributions to be made by the additional or new members at the time those new members are admitted.

ARTICLE VII

Continuance of Business

The remaining member or members of the Company have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company. The business may be continued only on the unanimous written consent of the remaining member or members.

ARTICLE VIII

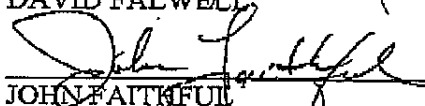
Additional Provisions

The power to adopt, alter, amend or repeal the regulations of the Company is vested entirely in the managers listed in Article V.

IN WITNESS WHEREOF, we have executed these Articles of Organization on this 28th day of August, 2002, at Dunedin, Florida.



DAVID FALWELL



JOHN FAITHFUL



DIANE CHRISTMAN

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STATE OF FLORIDA
COUNTY OF PINELLAS

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State of Florida and County of Pinellas to take acknowledgments, personally appeared DAVID FALWELL, JOHN FAITHFUL and DIANE CHRISTMAN, who are all personally known to me to be the persons described in and who executed the foregoing Articles of Organization, _____ (or who identified themselves by _____) and who took an oath.

WITNESS MY HAND and official seal in the County and State aforesaid, this 28th day of August, 2002.



Notary Public
My Commission Expires:

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
AND REGISTERED OFFICE
OF FCF GROUP, L.L.C.**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered office/registered agent in the State of Florida:

1. The name of the limited liability company is FCF GROUP, L.L.C.
2. The name and address of the registered agent and office is DAVID FALWELL, 5119 29th Avenue South, Gulfport, Florida 33707.

Having been named as registered agent and to accept service of process for the above named 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.

Dated: August 28, 2002.

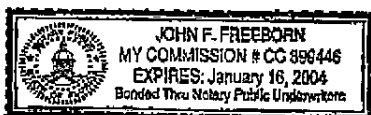
David Falwell
DAVID FALWELL

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TREASURY
TAMPA, FLORIDA

STATE OF FLORIDA
COUNTY OF PINELLAS

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State of Florida and County of Pinellas to take acknowledgments, personally appeared DAVID FALWELL, personally known to me to be the person described in and who executed the foregoing Certificate and Designation of Registered Agent and Registered Office, (or who identified himself by n/a.), and who took an oath.

WITNESS MY HAND and official seal in the County and State aforesaid, this 28th day of August, 2002.



John F. Freeborn
Notary Public
My Commission Expires: