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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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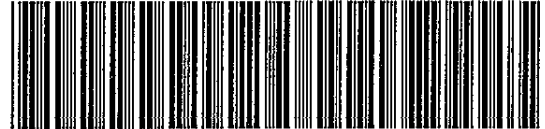
(Business Entity Name)

(Document Number)

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**BRIAN E. JOHNSON, P.A.**

*Attorneys At Law*

**Brian E. Johnson**

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Fax(727)398-4056

December 12, 2002

Florida Department of State  
Division of Corporations  
New Filings  
P.O. Box 6327  
Tallahassee, Florida 32314

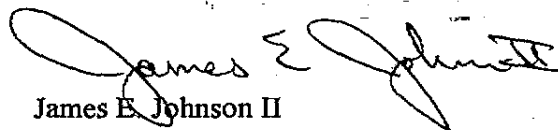
Re: Sun Vista Ventures, LLC; Articles of Organization

Dear Sir/Madam:

Enclosed please find the executed Articles of Organization for Sun Vista Ventures, LLC. Please file the Articles and return confirmation of the filing and a certificate of status to this office in the enclosed self-addressed, stamped envelope. I have included my firm check in the amount of \$130.00 to cover the filing costs as well as the certificate of status.

If you have any questions, please do not hesitate to contact my office.

Sincerely,

  
James E. Johnson II

Enclosures  
cc: Paul Hausman

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TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS

**ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY  
SUN VISTA VENTURES, LLC**

The undersigned subscriber to these Articles of Organization is a natural person, competent to contract, and hereby forms a Limited Liability Company for profit under the laws of the State of Florida.

**ARTICLE I - NAME**

The name of the Limited Liability Company is SUN VISTA VENTURES, LLC

**ARTICLE II - MAILING ADDRESS AND STREET ADDRESS**

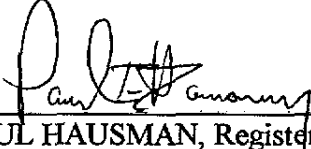
The mailing address of this Limited Liability Company is P.O. Box 8768, Madeira Beach, FL 33708, and the street address of this Limited Liability Company is 496 Harbor Dr. N., Indian Rocks Beach, FL 33785.

**ARTICLE III - REGISTERED AGENT**

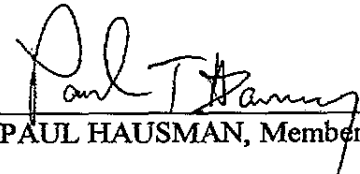
The name and the Florida street address of the registered agent are:

PAUL HAUSMAN, 496 Harbor Dr. N., Indian Rocks Beach, FL 33785.

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.

  
\_\_\_\_\_  
PAUL HAUSMAN, Registered Agent

IN WITNESS WHEREOF, I have hereunto set my hand and seal, acknowledged and filed the foregoing Articles of Organization under the laws of the State of Florida this 12<sup>th</sup> day of December, 2002.

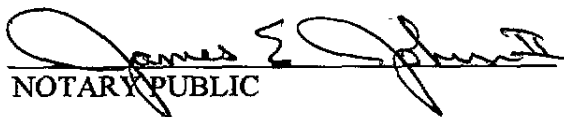
  
PAUL HAUSMAN, Member

STATE OF FLORIDA        )

COUNTY OF PINELLAS    )

BEFORE ME, the undersigned authority, personally appeared PAUL HAUSMAN, who provided FL Driver's License as identification and who executed the foregoing Articles of Organization, and he acknowledged before me that he executed the same for the purposes therein expressed.

Witness my hand and official seal in the County and State of named above this 12<sup>th</sup> day of December, 2002.

  
NOTARY PUBLIC

My Commission Expires:

