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58



ACCOUNT NO. : 072100000032

REFERENCE : 888526 10690A

AUTHORIZATION :

Patricia Pigot

COST LIMIT : \$ 155.00

ORDER DATE : January 10, 2003

ORDER TIME : 1:10 PM

ORDER NO. : 888526-005

CUSTOMER NO: 10690A

CUSTOMER: Victor M. Watson, Esq
Watson, Soileau, Deleo,
Burgett & Pickles, P.a.
Suite C
1970 Michigan Avenue
Cocoa, FL 32922

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DOMESTIC FILING

NAME: TSC OF BREVARD, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME:

The name of the Limited Liability Company is: **TSC OF BREVARD, LLC**

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: **TSC, LLC**

Mailing: 66 North Atlantic Avenue - #205
Cocoa Beach, FL 32931

Street: 66 North Atlantic Avenue - #205
Cocoa Beach, FL 32931

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ARTICLE III - REGISTERED AGENT

The name and mailing address of the registered agent and office is:

Name: J. Robert Scales

Street: 66 North Atlantic Avenue - #205
Cocoa Beach, FL 32931

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.



J. ROBERT SCALES 1/9/03
Date

ARTICLE IV - DURATION

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE V - MANAGEMENT

The Limited Liability Company is to be managed by the members and the names(s) and address(es) of the managing member is:

J. ROBERT SCALES
66 North Atlantic Avenue - #205
Cocoa Beach, FL 32931

ARTICLE VI - ADMISSION OF ADDITIONAL MEMBERS

The right, if given, of the remaining members to admit additional member(s) and the terms and conditions of the admissions shall be:

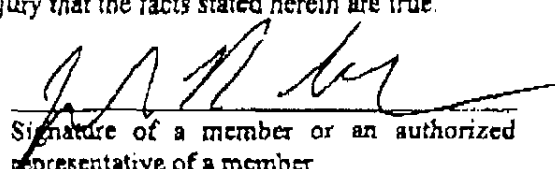
All members must consent to admission of additional members of the company.

ARTICLE VII - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining member(s) of the Limited Liability Company 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 Limited Liability Company shall be:

The remaining member(s) shall have the right to continue the business notwithstanding the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, or other event terminating a member's membership, provided all of the remaining member(s) consent in writing to such continuation.

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.


Signature of a member or an authorized representative of a member

J. ROBERT SCALES
Typed or printed name of signee

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, *FLORIDA STATUTES*, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, 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: **TSC OF BREVARD, LLC**
2. The name and address of the registered agent and office is:

J. ROBERT SCALES

Name

66 North Atlantic Avenue - #205

Address (P.O. Box not acceptable)

Cocoa Beach, FL 32931

City/State/Zip

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.


J. ROBERT SCALES

1/4/03
Date

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