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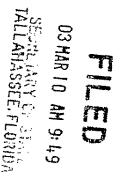
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Law Offices Of

David E. Platte

603 Indian Rocks Road Bellcair, FL 33756 (727) 461-0420

Also Admitted in Colorado

Fax (727) 461-5655

March 6, 2003

Department of State Division of State P.O. Box 6327 Tallahassee, FL 32314

Re: Lincoln Avenue, LLC

Please find enclosed the Articles of Organization for the above limited liability company with our check in the amount of \$125.00 for the filing thereof.

Also enclosed is a copy of the articles to be returned to this office with the filing information. ω

Thank you for your attention to this matter.

Very truly yours,

Stephanie A. Hall Legal Assistant

enc.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is Lincoln Avenue, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of Lincoln Avenue, LLC is 1952 Horseshoe Bend Road, Dunedin, FL 34698.

ARTICLE III - Duration:

The period of duration for Lincoln Avenue, LLC shall be perpetual.

is:

ARTICLE IV - Registered Agent:

The name and street address of the company's initial Registered Agent in the State of Florida

David E. Platte, Esquire 603 Indian Rocks Road Belleair, FL 33756

Said Registered Agent has simultaneously herewith executed a statement in writing prescribed by the Department of State accepting the appointment as a Registered Agent, which acceptance states that the Registered Agent is familiar with and accepts the obligations of that position.

ARTICLE V - Additional Members:

The Members may admit additional members to the company, provided the existing members have a right of first refusal to purchase any interest of an existing member and further provided that any additional members are subject to the terms and conditions of the Operating Agreement.

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ARTICLE VI - Continuation of Business

Upon the death, retirement, resignation or expulsion of any member of the company, the business of the company shall continue, subject to the terms of the Operating Agreement.

ARTICLE VII - Management

| The company is to be manage whose name and address is as follow | | , through one designated manage | 2 <u>2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 </u> |
|---|--|---|---|
| | Irma Jeanis 1952 Horseshoe Dunedin, FL 346 | | MAR 10 AM 9: METARY U. S. AHASSEE, FLO |
| By: | | STATE OF FLORIDA COUNTY OF PINELLAS The foregoing instrument was acknowled before me this 21 day of February for Iron Jeans OR produced in type of identification Florich Driving Notary Public TERRY B. LYNCH MY COMMISSION * DD 1 EXPIRES May 20, 200 Bonded Thru Notary Public Unday | edged who is dentification, |

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 SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. The name | of the Limited Liability Cor | mpany is: | | |
|--|---|---|--|--|
| | LINCOLN AVENUE, | LLC | | |
| 2. The name | and the Florida street addres | ss of the registere | ed agent and office are | s: Age |
| | David E. Plat | te, Esquire | _ . | A A A |
| | | (Name) | | SSEE.T |
| | 603 Indian Ro Florida street a | cks Road ddress (P.O. Box N | OT ACCEPTABLE) | FLORIDA |
| | Belleair | - FL | 33756 | |
| | | City/State/Zi | p | |
| liability compa agent and agre relating to the j | amed as registered agent and my at the place designated in the to act in this capacity. I further proper and complete perform my position as registered age | this certificate, I tr ther agree to con nance of my duties | hereby accept the appo nply with the provision , and I am familiar wit | ointment as registered es of all statutes |
| (| (Signature) | | | |

\$ 100.00 Filing Fee for Application

\$ 25.00

\$ 30.00

Designation of Registered Agent

Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)