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CAPITAL CONNECTION, INC.

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

Lyndon Properties LLC.

Signature _____

Requested by: _____

Name _____

Date

3/12/03

Time

9:10

Walk-In _____

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____ Art of Inc. File
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____ RA Resignation
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____ 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I:

The name of the Limited Liability Company is:

Lyndon Properties L.L.C.

ARTICLE II:

The mailing address and street address of the principal office of the Limited Liability Company is:

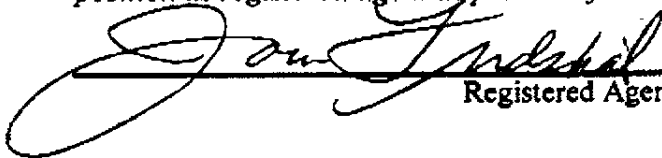
8134 Misty Oaks Blvd.
Sarasota, FL 34243

ARTICLE III:

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

Joan Fridshal, CPA, CFST
Westland Consulting
220 N. Tuttle Ave.
Sarasota, FL 34237

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.



Registered Agent's Signature

ARTICLE IV:

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company.



Signature of a member or an authorized representative of a member

(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.)

Linda N. Murdock

Typed or printed name of signee

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