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PICK-UP	TIAW	MAIL				
(Business Entity Name)						
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Certified Copies	Certificates	s of Status				
Special Instructions to Filing Officer:						

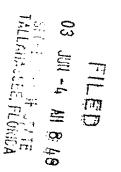




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## CAPITAL CONNECTION, INC.

. . .

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

(830) 224-8870 • 1	-800-342-8002 • Fa	X (850) 222-1222			
- Hingdowgies, LLC		OS JIM. 14 M 8-19			
				Art of Inc. File	~
				LTD Partnership File	
				Foreign Corp. File	
				L.C. File	
				Fictitious Name File	
				Trade/Service Mark	
			·	Merger File	
				Art. of Amend. File	
				RA Resignation	.,
				Dissolution / Withdrawal	
				Annual Report / Reinstatement	
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				Certificate of Good Standing	·
				Certificate of Status	<u>,                                    </u>
				Certificate of Fictitious Name	<del></del> .
				Corp Record Search	<u></u>
				Officer Search	*···
				Fictitious Search	
Signature	<del></del>			Fictitious Owner Search	<del></del>
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				Driving Record	
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Name	Date	12:30 Time		UCC 11 Search	• •
Limite				UCC 11 Retrieval	-
Walk-In	Will Pick Up			Courier	

#### ARTICLES OF ORGANIZATION

OF

#### Flyingdowgies, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

### **ARTICLE I - NAME:**

The name of the limited liability company shall be:

Flyingdowgies, LLC

#### ARTICLE II - ADDRESS:

The mailing address and street address of the principal office of the company shall be:

8302 Tartan Field Circle Bradenton, FL 34202

#### ARTICLE III - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the State of Florida is:

John E. Napolitano, Esquire 100 Wallace Avenue, Suite 240 Sarasota, FL 34237

Having been named as the 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

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

Kathleen Dain
Signature of 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.)

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these articles of organization in Sarasota, Florida, on this 4<sup>th</sup> day of June, 2003.

Kathleen Dain Signature Manager

STATE OF FLORIDA COUNTY OF SARASOTA

Sworn to and subscribed before me this  $4^{th}$  day of June, 2003, by Kathleen Dain, who is [ ] personally known to me or [X] produced FL DL# 500-501-56-963-0 as identification.

Kathleen Curtin
MY COMMISSION # D0108599 EXPIRES
April 14, 2006
BONGED THRU TENY FAIN INSURANCE, INC.

Notary Public - State of Florida

(Seal)