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Florida Department of State
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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : THE BUSINESS LAW GROUP
Account Number : I20000000233
Phone : (407)835-1234
Fax Number : (407)425-0032

EFFECTIVE DATE
6-7-03

LIMITED LIABILITY COMPANY

Press Williamson Financial Group, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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**ARTICLES OF ORGANIZATION
OF
PRESS WILLIAMSON FINANCIAL GROUP, LLC
A Florida Limited Liability Company**

**ARTICLE I
NAME**

The name of this limited liability company is Press Williamson Financial Group, LLC, referred to in these Articles of Organization as the "Company."

**ARTICLE II
MAILING AND STREET ADDRESS**

The mailing address of the principal office of the Company is as follows:

5263 Los Palma Vista Drive
Orlando, FL 32837

The street address of the principal office of the Company is as follows:

5263 Los Palma Vista Drive
Orlando, FL 32837

**ARTICLE III
REGISTERED AGENT**

The address of the initial Registered Office and the Registered Agent at such address are as follows:

Christopher Coleman
5263 Los Palma Vista Drive
Orlando, FL 32837

**ARTICLE IV
MANAGEMENT**

The Company is to be a Manager-managed company. The name and address of the initial Member-Manager is as follows:

<u>Name</u>	<u>Address</u>
Christopher Coleman	5263 Los Palma Vista Drive Orlando, FL 32837

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**ARTICLE V
COMMENCEMENT OF COMPANY'S EXISTENCE**

In accordance with Section 608.409(1), Florida Statutes, the Company's existence shall be deemed to have commenced at 12:01 a.m. on June 7, 2003.

**ARTICLE VI
DURATION**

The Company's existence shall be perpetual, unless terminated earlier by the unanimous written agreement of all Members.

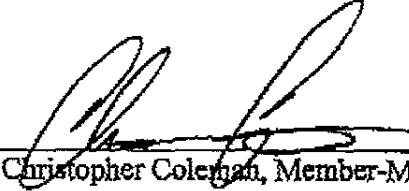
**ARTICLE VII
AMENDMENT**

The power to adopt, alter, amend or repeal these Articles and the Operating Agreement of this Company shall be vested in the voting Members of the Company.

**ARTICLE VIII
APPLICABLE LAW**

The Company is created pursuant to Chapter 608, Florida Statutes, and shall be governed by the laws of the State of Florida.

Dated this 10 day of June, 2003.


Christopher Coleman, Member-Manager

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**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT AND 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 company is "Press Williamson Financial Group, LLC".

2. The name and the Florida street address of the Registered Agent are as follows:

Christopher Coleman
5263 Los Palma Vista Drive
Orlando, FL 32837

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 of the Florida Statutes.

Dated effective the 10 day of June, 2003.


Christopher Coleman

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