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LAKE WALES ESTATES, LLC 636 NORTH RIO GRANDE AVENUE ORLANDO, FLORIDA 32805

Telephone: 407-835-9633 Facsimile: 407-835-9633

July 29, 2003

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

Re: Articles of Organization filed July 25, 2003

Enclosed herewith please find Articles of Correction changing the name of the company from "Whales" to "Wales."

Also enclosed herewith please find check number 1463 in the amount of \$30.00 for the filing of the same.

If you have any questions, please call.

Sincerely,

Deborah D. Hagen

Manager

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST LAKE	_	The name of the	he limited liability c	ompany is:						
SECO	<u>ND</u> :	The articles of	organization or the	application to tra	ansact business					
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	<u>OR</u>					HASSI	UG l			
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		Signature of	a member or authori	zed representativ	ve of a member	.				
		DEBORAH D. HAGEN, MANAGER								
Typed or printed name of signee										
			Filing Fee:	\$25.00						

Certified Copy:

\$30.00 (optional)

Electronic Articles of Organization For Florida Limited Liability Company

L03000027482 FILED 8:00 AM July 25, 2003 Sec. Of State

Article I

The name of the Limited Liability Company is: LAKE WHALES ESTATES LLC

Article II

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

636 N RIO GRANDE AVE ORLANDO, FL. 32805

The mailing address of the Limited Liability Company is:

636 N RIO GRANDE AVE ORLANDO, FL. 32805

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

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

DEBORAH D HAGEN 636 N RIO GRANDE AVE ORLANDO, FL. 32805

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.

Registered Agent Signature: DEBORAH HAGEN



Article V

The name and address of managing members/managers are:

Title: MGRM DEBORAH D HAGEN 636 N RIO GRANDE AVE ORLANDO, FL. 32805

Title: MGRM LARRY WILLIAMS 800 WESTWOOD SQUARE SUITE E OVIEDO, FL. 32765

Signature of member or an authorized representative of a member Signature: DEBORAH HAGEN

L03000027482 FILED 8:00 AM July 25, 2003 Sec. Of State

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