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ID:SAVAGE, KRIM, SIMONS, JONES

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Division of Corporations

Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : SAVAGE, KRIM, SIMONS & JONES, LLC

Account Number: 073617000267 Phone : (352)732-8944 Fax Number : (352)867-0504 MYISION OF CORPORATION

LIMITED LIABILITY COMPANY

OCF Properties, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION

of

OCF PROPERTIES, LLC * Florida Limited Liability Company



The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be OCF PROPERTIES, LLC ("Company").

ARTICLE II - ADDRESS

The physical address of the principal office of the company shall be 1713 SE 24th Loop, Ocala Florida 34471.

The mailing address of the principal office of the company shall be P.O. Box 4075, Ocala, Florida 34478.

ARTICLE III - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent and registered office of the Company in the state of Florida is Gary C. Simons, Esq., 121 NW Third Street, Ocala, FL 34475.

ARTICLE IV - EXISTENCE

The existence of the Company shall begin on August 10, 2003.

Signed this <u>vo</u> day of August, 2003.

TOM D. BRANAN, Organizer and

Authorized Representative of the Members

STATE OF FLORIDA COUNTY OF MARION

The foregoing instrument was acknowledged before me this <u>W</u> day of August, 2003, by TOM D. BRANAN, as Organizer and Authorized Representative of the Members, who is personally known to me.

Notary Public State of Florida

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ACCEPTANCE OF REGISTERED AGENT

for

OCF PROPERTIES, LLC, a Florida Limited Liability Company

Undersigned hereby states that he is familiar with the obligations of Registered Agent for the Company as provided by Chapter 608, Florida Statutes, and accepts the appointment as Registered Agent for the Company.

Signed this vo day of August, 2003.

GARY C. SIMONS, Registered Agent

STATE OF FLORIDA COUNTY OF MARION

The foregoing instrument was acknowledged before me this 20 day of August, 2003, by GARY C. SIMONS, as Registered Agent, who is personally known to me.

Angela M. Priest C Expires: April 24, 2005 Western Surety Company Commission #DD003270

Notary Public, State of Florida

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