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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name

: BUSINESS FILINGS

Account Number : 105256001620

: (508)827-5300

Fax Number

: (608)827-5501

LIMITED LIABILITY COMPANY

Belle L'Amour, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

ARTICLES OF ORGANIZATION OF Belle L'Amour, LLC

ARTICLE I

NAME

The name of the limited liability company shall be: Belle L'Amour, LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 12664 Flynn Road, Jacksonville, Florida 32223.

ARTICLE III

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Vicki Schneller, 516 Silverbell Court, Jacksonville, Florida 32259. Located in the County of St. Johns.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2043.

ARTICLE V

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Vicki Schneller, 516 Silverbell Court, Jacksonville, Florida 32259 Deborah Smith, 1848 Plantation Oaks Drive, Jacksonville, Florida 32223 Gina Ford, 4522 Crosstie Road North, Jacksonville, Florida 32257

Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,

Madison, WI 53717

(608) 827-5300

FAX AUDIT # 103000 2705 108

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Belle L'Amour, LLC

The name and address of the registered agent and office is: Vicki Schneller, 516 Silverbell Court, Jacksonville, Florida 32259. Located in the County of St. Johns.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: Vicki Schools

Wielei Schneller

Date: August 27, 2003

FAX AUDIT # 41030002705/08