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(Requestor's Name)

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(City/State/Zip/Phone #)

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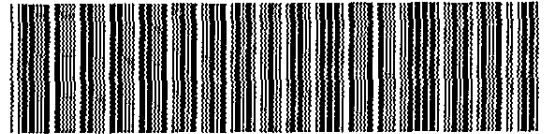
(Business Entity Name)

(Document Number)

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BK

CAPITAL CONNECTION, INC.

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

Barclay Woods LLC

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- ☒ 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 _____
- _____ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

Signature _____

Requested by: AW 9/15

Name _____

Date _____

Time _____

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**ARTICLES OF ORGANIZATION OF
BARCLAY WOODS, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — NAME:

The name of the Limited Liability Company is: Barclay Woods, LLC

ARTICLE II — ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is: 1085 West Morse Boulevard, Winter Park, Florida 32789.

ARTICLE III — DURATION:

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State. The company's existence shall be perpetual unless the company is earlier dissolved as provided in these articles of organization.

ARTICLE IV - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the State of Florida is: D. Paul Dietrich II, Attorney At Law, 37 North Orange Avenue, Orlando, Florida, 32801

ARTICLE V - MANAGEMENT

The company shall be managed by a manager in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or the articles of organization. The name and address of the manager of the company is:

Name	Address
Thomas J. Corkery	1085 West Morse Boulevard Winter Park, Florida 32789

ARTICLE VI - ADMISSION OF NEW MEMBERS

No additional members shall be admitted to the company except with the unanimous written consent of all the members of the company and on such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the company as set

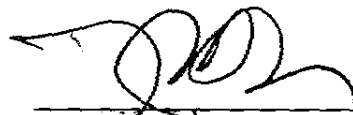
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forth in the regulations of the company, but the transferee shall have no right to participate in the management of the business and affairs of the company or become a member unless all the other members of the company other than the member proposing to dispose his or her interest approve of the proposed transfer by unanimous consent.

ARTICLE VII - TERMINATION OF EXISTENCE

The company shall be dissolved on the death, bankruptcy, or dissolution of a member or manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, unless the business of the company is continued by the consent of all the remaining members, provided there are a least two remaining members.

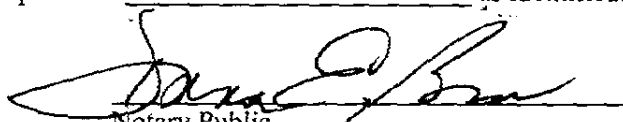
IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these articles of organization at Orlando, Orange County, Florida, on this 12th day of September, 2003.



D. Paul Dietrich II, Organizer

STATE OF FLORIDA
COUNTY OF ORANGE

Sworn to and subscribed before me this 12th day of September, 2003, by D. Paul Dietrich II who is / personally known to me or produced _____ as identification.



Notary Public

State of Florida

My Commission Expires: _____

