Division of Corporaters

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

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LIMITED LIABILITY COMPANY

NEVADA BROWN, LLC.

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Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR

NEVADA BROWN, LLC

FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

NEVADA BROWN, LLC

ARTICLE II - Address:

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

6901 Compton Lane South, Naples, FL 34104.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

M. D. Brown 6901 Compton Lane South, Naples, FL 34104.

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

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the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all assumes 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, F.S.

M. D. Bravin, Registered Agent

Article IV - Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager – managed company.

M. D. Brown, LLC Member

(in accordance with section 508.408(3), Florida Statutes, the execution of this document constitutes at affirmation under the penalties of perjuny that the facts stated herein are true.)

IND Brown, Signed