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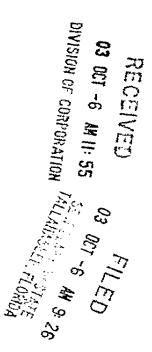
		
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CAPITAL CONNECTION, INC.

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

Rexis Lend	ing Group UC	OS OCI-6 M 9 20
		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
Signature		Officer Search Fictitious Search Fictitious Owner Search
Requested by:	10/6/08 11:15	Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search
Name Walk-In	Date Time Will Pick Up	UCC 11 Retrieval Courier



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 6, 2003

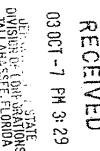
CAPITAL CONNECTION

TALLAHASSEE, FL

SUBJECT: LEXIS LENDING GROUP, LLC

Ref. Number: W03000028739





We have received your document for LEXIS LENDING GROUP, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$125.00 payment.

We assume that you wish to form an LLC. To do this, you will have to file ARTICLES OF ORGANIZATION for a Florida LLC. We cannot accept an "ARTICLES OF INCORPORATION" document for this purpose.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Document Specialist

Letter Number: 103A00054662

RE-SUBMITPLEASE OBTAIN THE ORIGINAL
FILE DATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPAN

ARTICLE I. - Name

The name of the Limited Liability Company is:

Lexis Lending Group, LLC

ARTICLE II. - Address

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

4300 N. University Drive Suite B-200 Fort Lauderdale, FL 33351

ARTICLE III. Registered Agent, Registered Office and
Registered Agent's Signature:

Lisa Leonardo Daniels, Esquire 4300 N. University Drive - Suite B-200 Fort Lauderdale, Florida

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 as provided for in Chapter 608, Florida Statutes.

Signature of Registered Agent

ARTICLE IV - Manager(s) or Managing Member(s)

The name and address of each Manager or Managing Member is as for

Title:

Name and Address:

Managing Member

Loan Officer

Randall Folgate

340 N.W. 19th Street - Suite 105

Boca Raton, FL 33432

Managing Member

William Fowler

340 N.W. 19th Street - Suite 105

Boca Raton, FL 33432

Managing Member

Lisa Leonardo Daniels

4300 N. University Drive - Suite B200

Fort Lauderdale, FL 33351

Lisa Leonardo Daniels