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(Business Entity Name)

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*BN*

**HOLBROOK, AKEL, COLD, STIEFEL & RAY, P.A.**

ATTORNEYS AT LAW

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JACKSONVILLE, FLORIDA 32202-5059

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October 17, 2003

Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: Elkton, LLC

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03 OCT 20 AM 10:50  
OFFICE OF THE CLERK  
TALLAHASSEE, FLORIDA

Ladies and Gentlemen:

Enclosed are an original and one copy of Articles of Organization of Elkton, LLC, a Florida Limited Liability Company, together with our check for \$125.00 covering your filing fee (\$100) and registered agent fee (\$25). Please send an acknowledgment of this filing directly to me at your earliest convenience.

Thank you for your help in this matter.

Sincerely yours,



H. LEON HOLBROOK

HLH/rh

Enclosure

cc: Mr. and Mrs. C. Brightman Skinner

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: **ELKTON, LLC**

**ARTICLE II - Address:**

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

**Principal Office Address:**

6210 San Jose Blvd. West

Jacksonville, FL 32217

**Mailing Address:**

6210 San Jose Blvd. West

Jacksonville, FL 32217

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

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

H. LEON HOLBROOK, ESQUIRE

Name

One Independent Drive, Suite 2301

Florida street address (P.O. Box **NOT** acceptable)

Jacksonville, FL 32202

City, State, and Zip

*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, F.S..*



Registered Agent's Signature

(CONTINUED)

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STATE  
JACKSONVILLE  
FLORIDA

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR	C. Brightman Skinner
	6210 San Jose Boulevard West
	Jacksonville, FL 32217

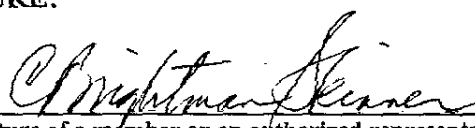
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(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

C. BRIGHTMAN SKINNER

Typed or printed name of signee

**Filing Fees:**

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)