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To:

Division of Corporations
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From:

Account Name : LEO J. SALVATORI
Account Number : I20030000112
Phone : (239) 263-1480
Fax Number : (239) 649-0158

LIMITED LIABILITY COMPANY

HATSEPSUT, LLC

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**ARTICLES OF ORGANIZATION OF
HATSHEPSUT, LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies as follows:

ARTICLE I

NAME

The name of the limited liability company shall be HATSHEPSUT, LLC (the "Company").

ARTICLE II

ADDRESS OF PRINCIPAL PLACE OF BUSINESS

The mailing address and street address of the principal office of the Company shall be 400 Flagship Drive #402, Naples, Florida 34108.

ARTICLE III

MANAGEMENT

The Company shall be managed by one or more managers and shall be a manager-managed company. The initial manager of the Company shall be: Terrance Smith.

ARTICLE IV

DURATION

The Company shall be perpetual in duration and shall exist until dissolved in a manner provided by law or, if an operating agreement is adopted by the members, as provided for therein.

ARTICLE V

MEMBERSHIP

The members of the Company shall have the right to admit new members upon unanimous agreement of the existing members of the Company or, if an operating agreement is adopted by the members, as provided for therein.

ARTICLE VI

MEMBERS' RIGHT TO CONTINUE BUSINESS

The existence of the Company shall continue notwithstanding the death, bankruptcy or dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the Company.

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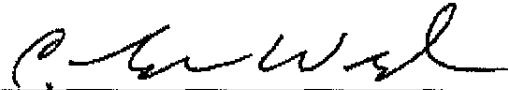
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ARTICLE VII

**DESIGNATION OF REGISTERED OFFICE AND
REGISTERED AGENT**

The name of the initial registered agent of the limited liability company is **C. LANE WOOD**, and the address of the office of the registered agent is **4001 Tamiami Trail North, Suite 330, Naples, Florida 34103**.

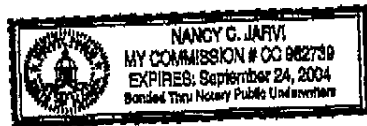
IN WITNESS WHEREOF, the undersigned has signed these Articles Of Organization as authorized representative at Naples, Florida on October 30, 2003.



C. LANE WOOD, as Authorized
Representative

STATE OF FLORIDA
COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this 30th day of October, 2003, by C. LANE WOOD, as Authorized Representative for and on behalf of one or more members of HATSHEPSUT, LLC, a Florida limited liability company, who is personally known to me.


Nancy C. Jarvi, Notary Public
My Commission Expires:

In accordance with § 608.408(3), Florida Statutes, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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**CERTIFICATE OF DESIGNATION OF REGISTERED OFFICE AND
REGISTERED AGENT**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA

The name of the limited liability company is **HATSHEPSUT, LLC.**

The name of the initial registered agent of the limited liability company is **C. LANE
WOOD**, and the address of the office of the registered agent is **4001 Tamiami Trail North,
Suite 330, Naples, Florida 34103.**

HATSHEPSUT, LLC

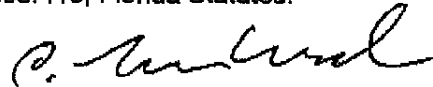
By:



C. LANE WOOD, as Authorized
Representative

REGISTERED AGENT ACCEPTANCE

Having been named as registered agent and to accept service of process for the above
stated limited liability company at the place designated in these Articles, the undersigned hereby
accepts the appointment as registered agent and agrees to act in that capacity. The
undersigned further agrees to comply with the provisions of all statutes relating to the proper
and complete performance of its duties, and is familiar with and accepts the obligations of its
position as registered agent as provided in Section 608.415, Florida Statutes.



C. LANE WOOD

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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
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