Division of Corporations

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Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : ROETZEL & ANDRESS

Account Number : 120000000121 Phone : (239)649-6200 Fax Number : (239)261-3659

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LIMITED LIABILITY COMPANY

ESTERO ISLAND RESORTS, LLC

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FAX AUDIT NUMBER: (((H03000209280 3)))

ARTICLES OF ORGANIZATION

OF

ESTERO ISLAND RESORTS, LLC

ARTICLE I

1. The name of the Limited Liability company is: ESTERO ISLAND RESORTS, LLC

ARTICLE II

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

1674 W Smith Valley Road, Suite A. Greenwood, IN 46142

ARTICLE III

3. Its registered office in the State of Florida is to be located at 850 Park Shore Drive, Third Floor, Naples, FL 34103 and its registered agent at such address is: Steve Falk.

ARTICLE IV

The company will be managed by members, the name and addresses of those who are to serve until the first meeting of members or until their successors are elected are:

NAME

ADDRESS

Darin M. Smith

1674 W Smith Valley Road, Suite A

Greenwood, IN 46142

Thomas Brueggernann

1674 W Smith Valley Road, Suite A

Greenwood, IN 46142

IN WITNESS WHEREOF, the undersigned, being the individual forming the Company, has and Riknowledged these Articles of Organization this _____day of September, 2003.

Thomas Brucggemann, Managing Member

414203

Date: 11/3/03 Time: 12:26 PM To: @ 18502050383

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FAX AUDIT NUMBER: (((H03000309280 3)))

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

The undersigned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is:

ESTERO ISLAND RESORTS, LLC

2. The name and address of the registered agent and office is:

Steve Falk 850 Park Shore Drive, Third Floor Naples, FL 34103

Thomas Brueggemann, Managing Member

DATE

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.

SIGNATURE

Sterre Ve

DATE

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