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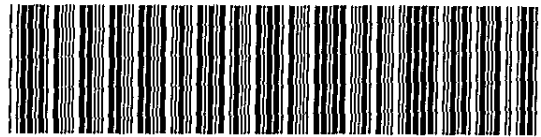
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Acknowledgement

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W. P. Verifier

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EFFECTIVE DATE
12/15/03

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DIVISION OF CORPORATIONS
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Griffin & Griffin, L.L.C.
(Name of Limited Liability Company)

EFFECTIVE DATE
12/15/03

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephen L. Ivie
(Name of Person)

Stephen L. Ivie, P. C.
(Firm/Company)

335 McLendon Street
(Address)

Ashburn, GA 31714
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen L. Ivie at (229) 567-2414
(Name of Person) (Area Code & Daytime Telephone Number)

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STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

EFFECTIVE
12/15

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Griffin & Griffin, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

950 Spinnaker's Reach Drive

950 Spinnaker's Reach Drive

Ponte Vedra Beach, FL 32082

Ponte Vedra Beach, FL 32082

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

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

John W. Griffin

Name

950 Spinnaker's Reach Drive

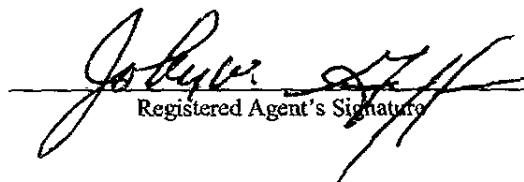
Florida street address (P.O. Box NOT acceptable)

Ponte Vedra Beach FLORIDA 32082

City, State, and Zip

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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..


Registered Agent's Signature

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:

MGRM

John W. Griffin
950 Spinnaker's Reach Drive
Ponte Vedra Beach, FL 32082

(Use attachment if necessary)

Article V

The effective date shall be December 15, 2003.

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.)

John W. Griffin

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)

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