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(Requestor's Name)

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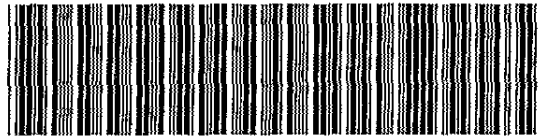
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 DEC -9 AM 9:04

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REBECCA J. DEL MEDICO, ESQ.
6281 FLORIDIAN CIRCLE
LAKE WORTH, FLORIDA 33463
(561) 964-6622
Fax: (561) 964-1615

December 8, 2003

Department of State
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

Re: Cherokee Sky LLC

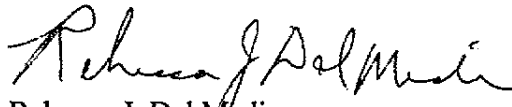
Dear Sirs or Madam:

Please find enclosed an original and one copy of the Articles of Organization, and Certificate of Designation of Registered Agent for the above referenced Florida Limited Liability Company, along with an Attorney Trust check in the amount of \$130.00. Also enclosed is an authorization letter for use of the name Cherokee Sky.

Please stamped the copy as filed and return it to this office, along with a certificate of status. If you have any questions regarding the enclosed, please contact our office.

Thank you.

Sincerely,


Rebecca J. Del Medico

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Cherokee Sky Inc.
177 Bank Street
P.O. Box 997
Tellico, Plains TN. 37385

December 1, 2003

Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

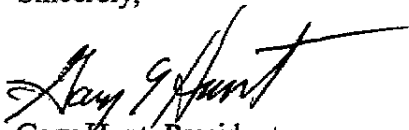
Dear Sir or Madam:

This letter will serve to authorize the use of the name Cherokee Sky LLC. for a new, to be formed Florida Limited Liability Company. This limited liability will be affiliated with Cherokee Sky, Inc.

Should you have any questions, please contact our corporate attorney, Rebecca J. Del Medico, Esq., 6281 Floridian Circle, Lake Worth, Florida 33463, Phone 561-964-6622.

Thank you for your courtesy in this matter.

Sincerely,


Gary Hunt, President

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**ARTICLES OF ORGANIZATION FOR
CHEROKEE SKY, LLC.**

ARTICLE I- NAME:

The name of the Limited Liability Company is:

Cherokee Sky, LLC.

ARTICLE II- ADDRESS:

The mailing address and street address of the principal office of Cherokee Sky LLC. is:

177 Bank Street
P.O. Box 997
Tellico, Plains TN. 37385

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ARTICLE III- DURATION:

The period of duration for the Cherokee Sky LLC. shall be perpetual.

ARTICLE IV- MANAGEMENT:

Cherokee Sky LLC. is to be manager-managed by one or more managers. Managers may, but are not required to, be members of Cherokee Sky LLC.

The name and address of the initial manager is:

Gary Hunt
177 Bank Street
P.O. Box 997
Tellico, Plains TN.

**ARTICLE V-NAME AND ADDRESS OF THE
INITIAL REGISTERED AGENT**

The initial registered agent is:

Rebecca J. Del Medico, Esq.
6281 Floridian Circle
Lake Worth, Florida 33463

ARTICLE VI-CLASSES OF MEMBERSHIP

There shall be two (2) classes of members within Cherokee Sky, LLC. Class A members and Class B members, whose rights shall be set forth in the Operating Agreement.

ARTICLE VII- VOTING RIGHTS OF MEMBERS

Class A Members shall be voting
Class B Members shall be non-voting.

ARTICLE VIII-CONTINUATION OF BUSINESS

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event, which terminates the continued membership of a member, the remaining members shall have the right to continue the business.

ARTICLE IX-RIGHT TO ADMIT ADDITIONAL MEMBERS

The members shall have the right to admit additional members, upon the consent of a majority-in-interest of the members.

Initial Member



Gary Hunt

Date: December 2, 2003

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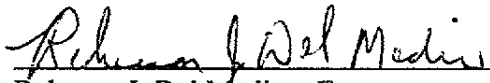
**CERTIFICATE OF DESIGNATION
OF REGISTERED AGENT**

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.

1. The name of the Limited Liability Company is: **Cherokee Sky LLC.**
2. The name and address of the Registered Agent and Office is:

Rebecca J. Del Medico, Esq.
6281 Floridian Circle
Lake Worth, Florida 33463

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 a registered agent.


Rebecca J. Del Medico, Esq..
Registered Agent

Date: December 9, 2003

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