P.01/03

### Florida Department of State

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Account Name : BUSINESS FILINGS Account Number : 105256001620 Phone : (608)827-5300

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LIMITED LIABILITY COMPANY

FFMB Funding LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

DIVISION OF CORPORATION

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# ARTICLES OF ORGANIZATION OF FFMB Funding LLC

ARTICLE I

NAME

The name of the limited liability company shall be: FFMB Funding LLC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 8667 South Lake Circle, Fort Myers, Florida 33908.

#### ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Timothy Mankin, 8667 South Lake Circle, Fort Myers, Florida 33908. Located in the County of Lee.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2043.

#### ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Timothy Mankin, 8667 South Lake, Fort Myers, Florida 33908

Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,

Madison, WI 53717

(608) 827-5300

FAX AUDIT # 10 3000 3412027

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED 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.

The name of the limited liability company is: FFMB Funding LLC

The name and address of the registered agent and office is: Timothy Mankin, 8667 South Lake Circle, Fort Myers, Florida 33908. Located in the County of Lee.

Having been named as registered agent and to accept service of process for the above stated 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:

Timothy Mankin

Date: December 17, 2003

03 DEC 23 AM 9: 28 SECRETARY OF STATE.

FAX AUDIT # 163000341 2027