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TROIANO & ROBERTS, P.A.

ATTORNEYS AT LAW

CLYDE L. ROBERTS (1927-1971)

317 S. Tennessee Avenue
LAKELAND, FLORIDA 33801-4617

REPLY TO:
P. O. DRAWER 829
LAKELAND, FLORIDA 33802-0829
TELEPHONE (863) 686-7136
FAX (863) 686-9157

D. A. TROIANO VICTOR J. TROIANO NICHOLAS J. TROIANO

January 5, 2004

Via Federal Express

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

Re: LYNCONN, LLC

Dear Sir or Madam:

Enclosed with this letter please find the following:

- 2. Our firm's check in the amount of \$155.00 representing the filing fee of \$100.00, the registered agent fee of \$25.00 and the fee of \$30.00 for a certified copy of the Articles of Organization.

Please file said document and return the certified copy of the Articles of Organization to our office. Please expedite this matter. We are enclosing a return Federal Express mailer for your convenience.

Should you have any questions or comments, please do not hesitate to contact our office.

Sincerely,

D. A. Troiano

/p

Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The Name of the Limited Liability Company is: LYNCONN, LLC.

ARTICLE II - Address:

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

a: Mailing Address: 1004 West Main Street, Lakeland, Florida 33815

b: Street Address: 1004 West Main Street, Lakeland, Florida 33815

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

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

ROBERT C. LYNCH Name

1004 West Main Street, Lakeland, Florida 33815 Florida street address (Post Office Box NOT acceptable)

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 actin 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, F.S.

Registered Agent's Signature

ARTICLE IV – Management (Check applicable box) The Limited Liability Company is to be managed by one manager or managers and is, therefore, a manager – managed company. X The Limited Liability Company is to be managed by one member or members and is, therefore, member – managed company. Robert Combanaged Company. 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.)

ROBERT C. LYNCH
Typed or printed name of signee

SECULETARY OF STATE

ACCEPTANCE OF REGISTERED AGENT

The undersigned, being the person named in the Articles of Organization of LYNCONN, LLC, as the registered agent of this Limited Liability Company, hereby consents to accept service of process for the above stated company at the place designated in the Articles of Organization, and accepts the appointment of registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of her duties, and is familiar with and accept the obligations of the position of registered agent.

ROBERT C. LYNCH

Registered Agent