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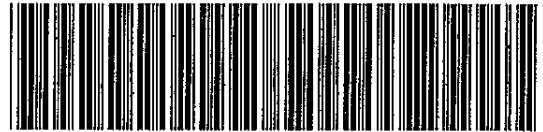
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FILED

KIMBROUGH & KOACH, LLP
ATTORNEYS AT LAW
1530 CROSS STREET
SARASOTA, FLORIDA 34236-7015

ROBERT A. KIMBROUGH
E-Mail: RAK@KIMBROUGHKOACH.COM
KRAIG H. KOACH
E-Mail: KHK@KIMBROUGHKOACH.COM

Telephone: 941-951-1234

Facsimile: 941-952-1530

January 9, 2004

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: Articles of Organization of **BUSARD, LLC**

Dear Sir or Madam:

Enclosed please find the original Articles of Organization for **BUSARD, LLC**. I have also enclosed a check in the amount of \$130.00 representing the following fees:

1.	Filing Fee	\$	125.00
2.	Registered Agent Fee		25.00
3.	Certificate of Status		<u>5.00</u>
		\$	130.00


Please return all correspondence concerning this matter to the following:

Kraig H. Koach, Esquire
Kimbrough & Koach, LLP
1530 Cross Street
Sarasota, FL 34236

For further information concerning this matter, please call Kraig H. Koach, Esquire at 941-951-1234.

Very truly yours,

KIMBROUGH & KOACH, LLP



Kraig H. Koach

KHK:jan
Enclosures

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I
NAME:**

The name of the Limited Liability Company is:

BUSARD, LLC

**ARTICLE II
ADDRESS:**

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

Principal Office Address:

1219 First Street
Sarasota, FL 34236

Mailing Address:

1219 First Street
Sarasota, FL 34236

**ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE,
REGISTERED AGENT SIGNATURE**

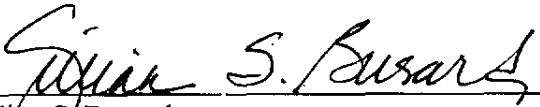
The name and the Florida street address of the initial registered agent are:

**Gillian S. Busard
1219 First Street
Sarasota, FL 34236**

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

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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.


Gillian S. Busard

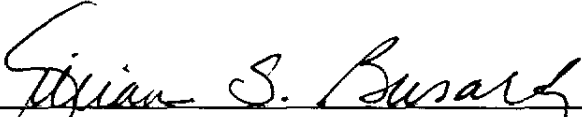
ARTICLE IV
MANAGEMENT:

The name and address of each Manager or Managing Member is as follows:

Title:
Gillian S. Busard, Managing Member

Address:
1219 First Street
Sarasota, FL 34236

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 9th day of January, 2004.


GILLIAN S. BUSARD, Managing 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.)

GILLIAN S. BUSARD
Typed or printed name of signee