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(Requestor's Name)

(Address)

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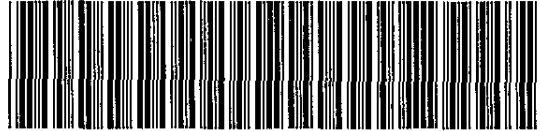
(Business Entity Name)

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CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 426482 9666A

AUTHORIZATION :

*Patricia Pizute*

COST LIMIT : \$ 125.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : February 5, 2004

ORDER TIME : 2:11 PM

ORDER NO. : 426482-005

CUSTOMER NO: 9666A

CUSTOMER: Tim Haines, Esq  
Gray, Ackerman & Haines, P.a.

Suite 1  
125 Ne First Avenue  
Ocala, FL 34470-6675

DOMESTIC FILING

NAME: ED PACE, LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION**  
FOR  
**ED PACE, LLC**  
A FLORIDA LIMITED LIABILITY COMPANY

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**ARTICLE I.**  
**NAME**

The name of the Limited Liability Company is "Ed Pace, LLC" (the "Company").

**ARTICLE II.**  
**ADDRESS**

The mailing address and street address of the principal office of the Company is 10592 NW 11<sup>th</sup> Place, Ocala, FL 34482-9545.

**ARTICLE III.**  
**DURATION**

The period of duration for the Company shall be perpetual unless the Company is earlier dissolved in accordance with either the provisions of the *Florida Limited Liability Company Act, Sections 608.401 through 608.514* of the *Florida Statutes Annotated* (the "Act") or the Company's regulations among the members (the "Regulations").

**ARTICLE IV.**  
**MANAGEMENT**

The Limited Liability Company is to be managed by a manager and the name and address of such manager who is to serve as manager is:

Edward B. Pace  
10592 NW 11<sup>th</sup> Place  
Ocala, FL 34482-9545

**ARTICLE V.**  
**PURPOSE**

The purpose for which the Company is being organized is to install cabinet work in residential and commercial buildings, to perform installation and repairs of other kinds, and any other lawful business approved by the members of the Company and for which a limited liability company may be formed under the laws of the State of Florida.

**ARTICLE VI.**  
**MEMBERS' RIGHTS TO CONTINUE BUSINESS**

The right of the remaining members of the Company to continue the business on 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 in the Company shall be

ARTICLES OF ORGANIZATION  
FOR  
ED PACE, LLC.  
A FLORIDA LIMITED LIABILITY COMPANY

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upon the consent of all of the remaining members in accordance with the terms and conditions of the Regulations to continue the business of the Company, provided that there is at least one (1) remaining member.

ARTICLE VII.  
AMENDMENTS

The Company reserves the right to amend, alter, change or repeal any provision contained in these Articles of Organization, in the manner now or hereafter prescribed by the Act.

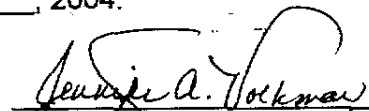
IN WITNESS WHEREOF, the undersigned, being one of the members of the Company, has hereunto set his hand this 4th day of February, 2004.

  
EDWARD B. PACE

STATE OF FLORIDA  
COUNTY OF MARION

The foregoing ARTICLES OF ORGANIZATION was acknowledged before me by EDWARD B. PACE as a member of the above named limited liability company, who is personally known by me.

Dated: this 4th day of February, 2004.

  
Print Name: JENNIFER A. VOLKMAR  
Notary Public, State of Florida  
Commission number \_\_\_\_\_  
Commission expires \_\_\_\_\_

JENNIFER A. VOLKMAR  
Notary Public, State of Florida  
My comm. expires January 1, 2007  
Comm. No. DD 167134

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

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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: *Ed Pace, LLC.*
2. The name and address of the registered agent and office is:

Edward B. Pace  
10592 NW 11<sup>th</sup> Place  
Ocala, FL 34482-9545

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.

*Edward B Pace*

Edward B. Pace

Date: 2/4/04

STATE OF FLORIDA  
COUNTY OF MARION

The foregoing instrument was acknowledged before me this 4<sup>th</sup> day of February, 2004, by EDWARD B. PACE, who is  personally known to me or who  has produced \_\_\_\_\_ as identification.

Sign *Jennifer A. Volkman*

Print JENNIFER A. VOLKMAN

Notary Public, State of Florida

Commission Expiration: \_\_\_\_\_

Commission No.: \_\_\_\_\_