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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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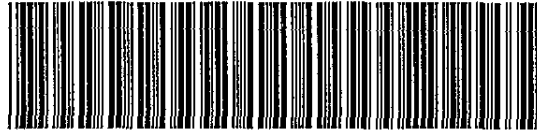
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**KAUFMAN, CHAIKEN, MILLER & KLORFEIN**

A PROFESSIONAL CORPORATION  
ATTORNEYS AND COUNSELLORS AT LAW

SUITE 720

400 PERIMETER CENTER TERRACE, N. E.

ATLANTA, GEORGIA 30346-1234

TELEPHONE (770) 390-9200

FACSIMILE (770) 395-6720

STEPHEN R. KLORFEIN

February 5, 2004

Secretary of State  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32314

RE: Jordan Family, LLC  
Our File No. 4740-003

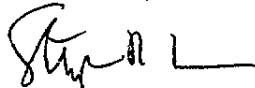
Dear Sir or Madam:

Enclosed are an original and one copy of the Articles of Organization for the referenced limited liability company, together with a Certificate of Designation of Registered Agent/Registered Office and our firm check in the amount of \$125.00 for the filing fee. Please enter this information into your data base and return the Certificate of Organization to me once you have completed this process.

If you have any questions or concerns, please feel free to contact me.

Very truly yours,

KAUFMAN, CHAIKEN, MILLER & KLORFEIN



Stephen R. Klorfein  
For the Firm

SRK/fd

Enclosures

cc: Gregory Jordan

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Jordan Family, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

592 Western Lake Drive

Santa Rosa Beach, FL 32459

**Mailing Address:**

592 Western Lake Drive

Santa Rosa Beach, FL 32459

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

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

Gregory Jordan

Name

592 Western Lake Drive

Florida street address (P.O. Box **NOT** acceptable)

Santa Rosa Beach FLORIDA 32459

City, State, and Zip

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TALLAHASSEE FLORIDA

*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 as provided for in Chapter 608, Florida Statutes..*

  
Registered Agent's Signature

**ARTICLE IV- Manager(s) or Managing Member(s):**

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

Gregory Jordan

592 Western Lake Drive

Santa Rosa Beach, FL 32459

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

  
\_\_\_\_\_  
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.)

Gregory Jordan  
\_\_\_\_\_  
Typed or printed name of signee

**Filing Fees:**

**\$100.00 Filing Fee for Articles of Organization**

**\$ 25.00 Designation of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**