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To:

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Fax Number : (850) 205-0383

From:

Account Name : CLIFFORD M. KING  
Account Number : 072100000320  
Phone : (941) 952-0990  
Fax Number : (941) 954-0361

**LIMITED LIABILITY COMPANY**  
**FLORIDA SOUTHWEST REALTY GROUP, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
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**ARTICLES OF ORGANIZATION  
OF  
FLORIDA SOUTHWEST REALTY GROUP, LLC**

1. Name. The name of the Limited Liability Company is:

**FLORIDA SOUTHWEST REALTY GROUP, LLC**

2. Principal Office. The principal office of the Limited Liability Company is:

7605 Alston Court  
University Park, Florida 34201

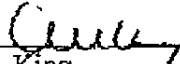
3. Mailing Address. The mailing address of the Limited Liability Company is:

7605 Alston Court  
University Park, Florida 34201

4. Registered Agent, Registered Office, & Registered Agent's Signature. The name and the Florida street address of the registered agent are:

Clifford M. King  
2033 Main Street, Suite 303  
Sarasota, Florida 34237

*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 obligation of my position as registered agent as provide for in Chapter 608, F.S.*

  
Clifford M. King

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In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Dated this 11th day of March, 2004.

  
\_\_\_\_\_  
Clifford M. King, Registered Agent

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