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TRANSMITTAL LETTER

	egistration Section ivision of Corporations				
SUBJECT:	: The Better Edge LLC				
(Name of Limited Liability Company)					
The enclosed	ed Articles of Organization and fee(s) are submitted for filing.				
	Please return all correspondence concerning this matter to the following:				
	John T. Laudermilk				
	(Name of Person)				
The Better Edge LLC					
	(Firm/Company)				
330	13th Street S.W.				
	(Address)				
	Vero Beach, FL 32962				
	(City/State and Zip Code)				
For further in	information concerning this matter, please call:				
John T. Lau	audermilk at (772) 473-7840				
	(Name of Person) (Area Code & Daytime Telephone Number)				

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The Better Edge LLC		 		_
ARTICLE II - Add The mailing address		ncipal office of the Limited Li	ability Compar	ny is:
Principal Office Address:		Mailing Address:		
The Better Edge LLC		The Better Edge LLC		_
330 13th Street S.W.		7989 Boone Trace		_
Vero Beach, FL 32962				
Vero Beach, FL 3296	52	Nashville, TN 37221		
ARTICLE III - Re The name and the F		Office, & Registered Agent's	s Signature:	04 AFT
ARTICLE III - Re The name and the F	gistered Agent, Registered lorida street address of the re	Office, & Registered Agent's	s Signature:	04 AF7 -1
ARTICLE III - Re The name and the F	gistered Agent, Registered lorida street address of the re John T. Laudermilk	Office, & Registered Agent's	s Signature:	
ARTICLE III - Re The name and the F	gistered Agent, Registered lorida street address of the re John T. Laudermilk Name	Office, & Registered Agent's agistered agent are:	s Signature:	1

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

Page 1 of 2 (CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	John T. Laudermilk
	330 13th Street S.W.
	Vero Beach, FL 32962
MGRM	Ruth E. Johnson
	7989 Boone Trace
	Nashville, TN 37221
MGRM	George F. MacEnemey
	599 S.E. Seahouse Drive
	Port St. Lucie, FL 34983
MGRM	James A. Briggs
	6745 51st Avenue
	Vero Beach, FL 32967
(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.)

John T. Laudermilk

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)