

L04 0000 32679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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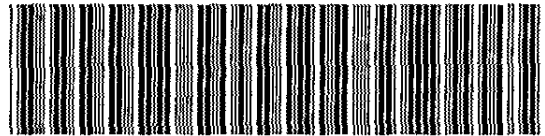
(Business Entity Name)

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TALLAHASSEE, FLORIDA

[Handwritten signature]



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 599820 10250A

AUTHORIZATION :

COST LIMIT : \$ 125.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : April 29, 2004

ORDER TIME : 10:04 AM

ORDER NO. : 599820-005

CUSTOMER NO: 10250A

CUSTOMER: Ms. Chris L. Wohlbrandt
Vogel Law Office

3936 Tamiami Trail North
Midwest Title Building, Suite
Naples, FL 34103-3592

DOMESTIC FILING

NAME: MCLD, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION

OF

MCLD, LLC

ARTICLE I

NAME

The name of the Limited Liability Company is: **MCLD, LLC**

ARTICLE II

ADDRESS

The mailing address and the street address of the principal office of the Limited Liability Company is: 1313 Turner Place, Naples, Florida 34110.

ARTICLE III

DURATION

The period of duration of the Limited Liability Company shall be perpetual or until dissolved in a manner provided by law or as provided in the regulations adopted by the members.

ARTICLE IV

MANAGEMENT

The Limited Liability Company is to be managed by a Manger. The name and address of the initial Manager is:

John Jassy
1313 Turner Place
Naples, FL 34110

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ARTICLE V
ADMISSION OF ADDITIONAL MEMBERS

Upon approval of the Members, in accordance with the Regulations, the Company is authorized to admit Additional Members to the Company.

ARTICLE VI
MEMBERS' RIGHTS TO CONTINUE BUSINESS

The remaining members of the Company shall have the right to continue the business upon 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 Limited Liability Company.

These Articles are executed this 23rd day of April, 2004 by an authorized representative of a Member of the Company, pursuant to Florida Limited Liability Company Act, Florida Statute §608.401 et seq.

AUTHORIZED REPRESENTATIVE
OF A MEMBER:



James D. Vogel

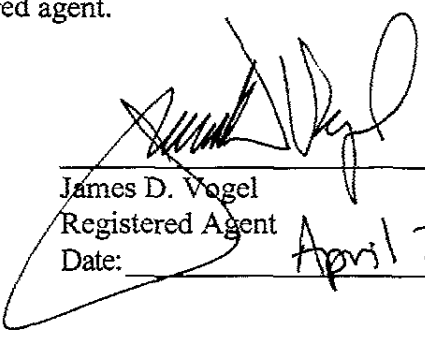
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 PR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. The name of the Limited Liability Company is: MCLD, LLC
2. The name and address of the registered agent and office is:

James D. Vogel
Vogel Law Office, P.A.
3936 Tamiami Trail North, Suite B
Naples, FL 34103

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.



James D. Vogel
Registered Agent
Date: _____

April 23, 2004