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JOHN C. BOVAY
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Gainesville, Florida 32605
TELEPHONE 352-331-9092

LL.M. IN TAXATION
ALSO ADMITTED IN
DISTRICT OF COLUMBIA

FACSIMILE 352-331-7376

EMAIL bovay@belfsouth.net

Johncbovay.com

May 20, 2004

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Articles of Organization of Asbury L.L.C.

To Whom It May Concern:

Enclosed are an original and one copy of the Articles of Organization of Asbury L.L.C., together with a check for \$155.00 to cover the \$100.00 filing fee, the \$25.00 fee for designation of registered agent and the \$30.00 fee for a certified copy.

The effective date of the company's existence is the date of filing of the Articles of Organization. Please send the certified copy to me and I will deliver it to my client. Thank you for your assistance.

Sincerely,

Khn C. Boyay

JCB:jc

Enclosures

04 PAY 24 PH 3: 52

Articles of Organization of Asbury L.L.C.

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name

The name of the Limited Liability Company is Asbury L.L.C.

ARTICLE II — Address

The mailing address and street address of the principal office of the Limited Liability Company is 901 N.W. 57th Street, Gainesville, Florida 32605.

ARTICLE III — Registered Agent and Registered Office

The name and the Florida street address of the initial registered agent are John C. Bovay, 901 N.W. 57th Street, Gainesville, Florida 32605.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this ______ day of May, 2004.

lignature of authori

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

Typed or printed name of authorized representative

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 608, Florida Statutes.

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

Signature of Registered Agent

Typed or printed name of Registered

Agent

SECRETARY DE FLARIDA