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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

JAW Enterprises, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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FAX AUDIT # 11040001221943

**ARTICLES OF ORGANIZATION
OF
JAW Enterprises, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **JAW Enterprises, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 13858 Thomasville Court, Jacksonville, Florida 32223.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: James Waler, 13858 Thomasville Court, Jacksonville, Florida 32223. Located in the County of Duval.

ARTICLE IV DURATION


The duration for the limited liability company shall be: 12/31/2044.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

James Waler, 13858 Thomasville Court, Jacksonville, Florida 32223

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Business Filings Incorporated, Organizer
Mark Schiff, AVP
Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717
(608) 827-5300

FAX AUDIT # 11040001221943

FAX AUDIT # 4040001221943CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **JAW Enterprises, LLC**

The name and address of the registered agent and office is: James Waler, 13858
Thomasville Court, Jacksonville, Florida 32223. Located in the County of Duval.

Having been named as registered agent and to accept service of process for the above
stated 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.

Signature: James Waler

James Waler

Date: May 21, 2004

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