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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

**WICKENS
HERZER
PANZA
COOK &
BATISTA**

David L. Herzer
Attorney at Law

dherzer@wickenslaw.com

Direct Dial: 440-930-8065
Main: 440-930-8000
Cleveland: 216-447-4418
Facsimile: 440-937-4466

A LEGAL PROFESSIONAL ASSOCIATION

35765 Chester Road
Avon, OH 44011-1262

August 16, 2004

FLORIDA DEPARTMENT OF STATE
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Formation of JAW, LLC

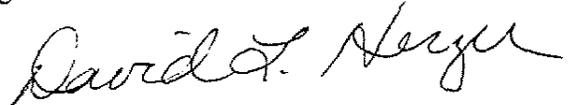
Dear Sir or Madam:

Enclosed please find a copy of the Articles of Organization which we are filing on behalf of our client, JAW, LLC. Also enclosed is a check in the amount of \$125.00 as the requisite filing fee in this regard.

If you have any questions or comments concerning this matter, please contact the undersigned.

Sincerely yours,

WICKENS, HERZER, PANZA, COOK & BATISTA
A Legal Professional Association



By: David L. Herzer

DLH/MGW/bal
Enclosures

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JAW, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David L. Herzer, Esq.
(Name of Person)

Wickens, Herzer, Panza, Cook & Batista
(Firm/Company)

35765 Chester Road
(Address)

Avon, OH 44011-1262
(City/State and Zip Code)

For further information concerning this matter, please call:

David L. Herzer, Esq. at (440) 930-8065
(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**

ARTICLE I - Name:

The name of the Limited Liability Company is:

JAW, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

591 Rum Road

North Captiva, FL 33945

Mailing Address:

P.O. Box 641

Pineland, FL 33945-0641

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Diane Jarmoszuk

Name

591 Rum Road

Florida street address (P.O. Box **NOT** acceptable)

Pineland

FLORIDA 33945-0641

City, State, and Zip

04 AUG 19 PM 3:59
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FILED

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

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

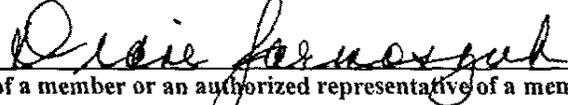
Name and Address:

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(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.)

Diane Jarmoszuk

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)