

OCT-05-2004

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GRAY ROBINSON

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Florida Department of State
Division of Corporations
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Division of Corporations
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MJH

From:

Account Name : GRAY, HARRIS & ROBINSON, P.A. - ORLANDO
Account Number : I20010000078
Phone : (407) 843-8880
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STATE
TALLAHASSEE FLORIDA

LIMITED LIABILITY COMPANY

RAMCAPITAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

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

ARTICLE II - Address:

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

456 Spanish Wells Court, Winter Garden, Florida 34787

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

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

**Lane Ramsfield
456 Spanish Wells Court
Winter Garden, Florida 34787**

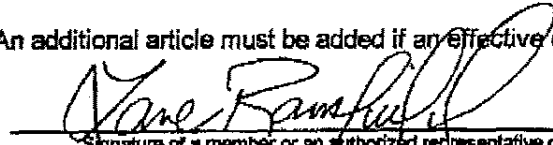
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 60B, F.S.


Registered Agent's Signature

Article IV - Management (Check box if applicable.)

: The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)


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.)

Lane Ramsfield, Authorized Representative

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)

STATE OF FLORIDA
TALLAHASSEE

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