DANIEL HICKS, ESQUIRE

Florida Department of State

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Account Name : DANIEL HICKS, P.A. Account Number : 075061003325 Phone : (352)351-3353 Fax Number

: (352)351-8054

LIMITED LIABILITY COMPANY

SUE VACEK AGENT, LLC

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ARTICLES OF ORGANIZATION OF SUE VACEK AGENT, L.L.C.

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I

The name of the limited liability company shall be SUE VACEK AGENT, L.L.C. ("Company"). The principal office and mailing address of the Company in Florida shall be 13509 NW Gainesville Road, Reddick, Florida 32686.

ARTICLE II

This is a single member Limited Liability Company, to be managed by the Member the single Member is Sue Vacek, who address is 13509 NW Gainesville Road, Reddick, Florida 32686.

ARTICLE III PURPOSES AND POWERS

The general purpose for which the Company is organized is to conduct any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

ARTICLE IV REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida is Sue Vacek, 13509 NW Gainesville Road, Reddick, Florida 32686.

ARTICLE V CAPITAL CONTRIBUTIONS

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The Member of the Company shall contribute to the capital of the Company the cash or property set forth as follows:

NAME

CAPITAL CONTRIBUTION

% Membership Units

Sue Vacek

\$1000.00

100%

100

ARTICLE VI TERMINATION OF EXISTENCE (CONTINUITY OF LIFE)

The company shall be dissolved upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of the Member.

IN WITNESS WHEREOF, the undersigned organizer have made and subscribed

these Articles of Organization at Ocala, Florida, for the foregoing uses and purposes this

day of December, 2004.

SUE VACEK

<u>≈___</u>`

STATE OF FLORIDA COUNTY OF MARION

Before me, personally appeared, Sue Vacek, to me well known and known to me to be the person described in and who executed the foregoing Articles of Organization and acknowledged to and before me that she executed said instrument for the purposes therein expressed, and that she is personally known to me or has produced Fl. Divery Laguer as identification.

WITNESS my hand and official seal this ______

day of December, 2004.

Notary Public, State of Florida

DEBBIE MATHIS
MY COMMISSION # DD 278223
EXPIRES: JACQUARY 1, 2008
8004-NOTARY
R. NUMBER DECOUNT AMOC. CO

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Sent By: Daniel Hicks, P.A.;

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ACCEPTANCE OF REGISTERED AGENT

I, the undersigned person, having been named as registered agent and to accept services of process for the above-stated limited liability company at the place designated in this statement, 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 obligation of my position as registered agent.

Dated, this _____ day of December, 2004.

SUE VACEK