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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: JOSEPH M. BALOCCO, P.A.

Account Number : 120000000147

Phone

: (954)764-0005

Fax Number

; (954)764-1478

LIMITED LIABILITY COMPANY

4105 Kings, LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION OF 4105 Kings, LLC

ARTICLE I - NAME:

The name of the Limited Liability Company is: 4105 Kings, LLC

ARTICLE II - ADDRESS:

The mailing address and the street address of the principal office of the Limited Liability Company is 1075 16th Avenue, Vero Beach, Florida 32980.

ARTICLE III - DURATION:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV- MANAGEMENT: (Check the appropriate box and complete the statement)

The Limited Liability Company is to be managed by the mambers and the name(s) and address(se) of the managing member(s) is/are;

Name

Address

Gereid E. Hamel

1075 16th Avenue Vero Beach, Florida 32960

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be conditioned upon the unanimous consent of the members.

ARTICLE VI - MEMBERS' RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be conditioned upon the unanimous consent of the remaining members.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this _____ day of December, 2004.

Signature of a member or an authorized

representative of a member

SECRETAGE OF STATE

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

Gerald K. Ramel
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.607, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOULDWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: 4105 Kings, LLC
- The name and the Florida street address of the registered agent are;

Gerald 5. Hemel
Name
1075 16th Avenue Florida Street Address (P.C. Box NOT acceptable)
Varo Beach, FL 32960
City, State and Zip Code

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.

Signsture

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