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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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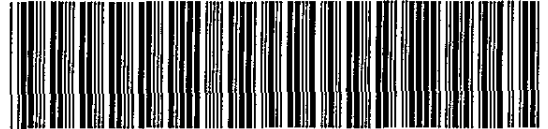
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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James P. Minutolo Co., L.P.A.
Attorney and Counselor at Law

December 16, 2004

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314


Re: Foxtail Creek, LLC
Articles of Organization

Dear Sir or Madam:

Accompanying this letter for filing with and processing by your offices are the original and one copy of the Articles of Organization for Foxtail Creek, LLC, a newly organized domestic limited liability company. Also, included with this letter is a check in the amount of \$160.00 in payment of the filing fee, certified copy fee and certificate of status fee.

If any questions or problems should arise in connection with the filing and processing of this document, please do not hesitate to contact the undersigned.

Sincerely,


James P. Minutolo

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Foxtail Creek, LLC

ARTICLE II - Address:

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

Principal Office Address:

2090 Florence Avenue, Suite 201
Cincinnati, OH 45206

Mailing Address:

2090 Florence Avenue, Suite 201
Cincinnati, OH 45206

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

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

Gregory J. Visconti

Name

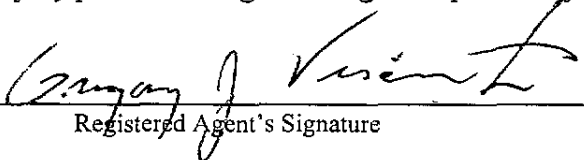
4801 Bonita Bay Boulevard, Unit 2103

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

Bonita Springs, FL

City, State, and Zip

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, F.S..


Registered Agent's Signature

(CONTINUED)

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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:

MGR

James P. Rolfes

2090 Florence Avenue, Suite 201

Cincinnati, OH 45206

MGR

Dale A. Davidson

37 Tech View Drive

Cincinnati, OH 45215

(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.)

James P. Rolfes

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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FLORIDA