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FROM

LOZIER THAMES

FRAZIER

P.A.

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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY
TIMMONS FAMILY PROPERTIES, L.L.C.

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
TIMMONS FAMILY PROPERTIES, L.L.C.**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes (the "Florida Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME.

The name of the Limited Liability Company is Timmons Family Properties, L.L.C. (hereinafter referred to as the "Company").

2. PERIOD OF DURATION.

The period of duration of the Company shall not exceed the maximum term permitted under the Florida Limited Liability Company Act. The Company may be dissolved sooner, however, as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

3. PURPOSE.

The purpose for which the Company is organized is to purchase, own, sell, mortgage, and do everything incidental or necessary relating to real property and personal property, and to engage in any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

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4. ADDRESS OF PLACE OF BUSINESS.

The mailing and street address of the place of business in Florida for the Company is 580 Bay Cliff Circle, Gulf Breeze, Florida 32561. Such address may be changed from time to time as provided in the Operating Agreement.

5. REGISTERED AGENT.

The initial registered agent in Florida for the Company is: Ruben B. Timmons, M.D., and the initial registered office is located at 580 Bay Cliff Circle, Gulf Breeze, Florida 32561.

6. INITIAL CAPITAL CONTRIBUTIONS.

The total amount of cash and a description of the agreed value of property other than cash contributed to the Company is as follows: One Hundred and No/100 Dollars (\$100.00) in cash.

7. ADDITIONAL CONTRIBUTIONS.

The total additional contributions, if any, agreed to be made by all Members and the times at which such contributions shall be made, are as follows: No total additional contributions have been agreed to as of the date of filing of these Articles of Organization. Additional contributions, if any, will be made as provided in the Operating Agreement.

8. CONTINUITY OF BUSINESS.

Upon 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 Company, the business of the Company shall be continued and the Company shall not be dissolved without the prior written consent of all the remaining Members of the Company.

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9. MANAGEMENT.

The Company shall be managed by not less than one (1) Manager, and is therefore a manager-managed company. In the event of the death of a Manager, a successor Manager shall be appointed as set forth in the Operating Agreement. The name and address of the initial Manager of the Company is as follows:

Ruben M. Timmons, M.D.
580 Bay Cliff Circle
Gulf Breeze, Florida 32561

10. INDEMNIFICATION

Unless expressly agreed otherwise in writing by all of the Members, the Company shall indemnify any Manager or former Manager to the full extent permitted under the Florida Limited Liability Company Act.

11. EFFECTIVE TIME.

These Articles shall be effective when filed with the Florida Department of State.

Executed at Gulf Breeze, Florida, on the 5th day of ^{January 2005} ~~December, 2004~~.

Timmons Family Properties, L.L.C.

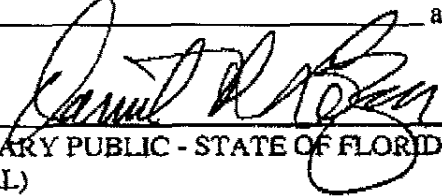
By: Ruben B. Timmons
Ruben B. Timmons, M.D.

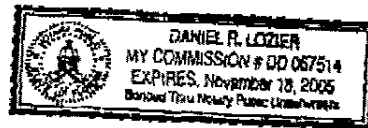
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STATE OF FLORIDA

COUNTY OF Escondido

The foregoing instrument was acknowledged before me this 5th day of January 2006,
by Ruben B. Timmons, M.D., a member of Timmons Family Properties, L.L.C., a Florida limited
liability company, on behalf of the company. He is personally known to me or has produced
_____ as identification.


NOTARY PUBLIC - STATE OF FLORIDA
(SEAL)



Print, Type or Stamp Name of Notary Public

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Chapter 608, Florida Statutes, the undersigned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the company is: Timmons Family Properties, L.L.C.
2. The name and address of the registered agent and office is:

Ruben B. Timmons, M.D., 580 Bay Cliff Circle, Gulf Breeze, Florida 32561

SIGNATURE Ruben B. Timmons
TITLE Manager
DATE December , 2004

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.

SIGNATURE Ruben B. Timmons
DATE December , 2004
REGISTERED AGENT FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA

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