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From:

*** Account Name : MACLEOD, MCGINNESS & BOWMAN, F.A.

Account Number : 102223000620

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LIMITED LIABILITY COMPANY

Sarasota Complete, L.L.C.

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1/10/2005

Florida Dept of State



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 11, 2005

MACLEOD, MCGUINNESS & BOWMAN, P.A.

SUBJECT: SARASOTA COMPLETE, L.L.C.

REF: W05000001550

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Your document is missing the registered agent's signature and the signature of the manager or authorized representative. It appears that n all of your document came through, or the original document is missing these signatures.,

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 12, 2005

MACLEOD, MCGUINNESS & BOWMAN, P.A.

SUBJECT: SARASOTA COMPLETE, L.L.C.

REF: W05000001550

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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FAX AUDIT #: H05-6736

ARTICLES OF ORGANIZATION OF SARASOTA COMPLETE, L.L.C.

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

Article 1, Name. The name of the Company is:

Sarasota Complete, L.L.C.

Article 2. Mailing Address of Principal Office. The mailing address of the principal office for the Company is:

7541 Renato Ct. Sarasota, FL 34238

Article 3. Duration. The period of duration of the Company shall be perpetual, unless sooner dissolved in accordance with the Regulations and the Florida Limited Liability Company Act.

Article 4. Registered Agent and Office. The name and address of the initial registered agent in Florida for the Company is as follows:

W. LEE McGINNESS

1800 Second Street, Suite 971 Sarasota, FL 34236

Article 5. Management. The Company is to be a manager-managed company.

Article 6. Commencement of Existence. In accordance with Section 608.409(1),

Florida Statutes, the date when existence of the Company shall commence is the date of subscription and acknowledgment of these Articles of Organization. In the event these Articles of Organization are not filed within the time period set forth in Section 608.409(1), Florida Statutes, the date when existence of the Company shall commence is the date of filing by the Secretary of State.

EFFECTIVE DATE
Of 10/05

FAX AUDIT #: H05-6736

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Under penalties of perjury, I affirm that the facts stated herein are true to the best of my knowledge and belief.

Executed on this 10th day of January , 200

W. LEE McGINNESS, Representative

ACCEPTANCE BY REGISTERED AGENT

Having been appointed the registered agent of SARASOTA COMPLETE, L.L.C., the undersigned accepts such an appointment, agrees to act in such capacity and is familiar with and accepts the obligations of the position as provided for in Chapter 608, Florida Statutes.

Executed this 10 day of January, 2005.

W. LEE McGINNESS

Registered Agent

2004 JAN 12 AN 8:52 SECRETARY OF STATE

FAX AUDIT #: H05-6736