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: RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL, P.A. Account Name

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LIMITED LIABILITY COMPANY

Milton Wilton Associates, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
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ARTICLES OF ORGANIZATION OF MILTON WILTON ASSOCIATES, LLC a Florida Limited Liability Company

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 do set forth the following:

1.	NAME.	The	name	oľ	the	Limited	Liability	Company is	MILTON	WILTON
ASSOCIATES	S, LLC (the	: "Co	mpany	/ ").			•	Company is		[]

- 2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 1933 Cold Canyon Road, Calabaras, California 91302.
- 3. <u>REGISTERED AGENT</u>. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: NRAI Services, Inc., 526 East Park Avenue, Tallahassee, Florida 3230

The undersigned has executed these Articles of Organization on the $26^{\frac{2}{10}}$ day of January, 2005.

Howard Safenowicz, Kinthorized Person

FTL 1364837]

CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- The name of the limited liability company is: MILTON WILTON ASSOCIATES, LLC.
- 2. The name and address of the registered agent and office is:

A 341

NRAI Services, Inc. 520 E. Park Ave. Tallahassee, Florida 32301

Having been named as registered agent and to accept service of process for the above stilled limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in its 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.

NRAI Services, Inc. Registered Agent

Date: 1/26/2005

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