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(City/State/Zip/Phone #)

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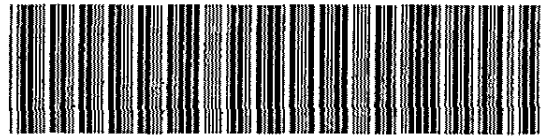
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LAW OFFICES  
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1933-1997

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OF COUNSEL

JOE W. DARDEN

JAMES M. MANIRE

January 13, 2005

Florida Department of State  
Division of Corporations  
Corporate Filings  
P. O. Box 6327  
Tallahassee, FL 32314

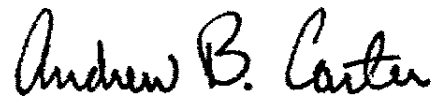
Re: NLR, T LLC  
Our File No. 3002.264

Dear Sir or Madam:

Please find enclosed for recording the Articles of Organization for NLR, T LLC, as well as check number 41654 in the amount of \$125 to cover the filing fee and the designation of registered agent fee. Once the document is recorded, please return it to me in the enclosed self-addressed stamped envelope.

If you have any questions or need any additional documentation, please call me at 1-800-455-0936. Thank you for your assistance in this matter.

Sincerely yours,



Andrew B. Carter

ABC:ew  
Enclosures

G:\docs\3002.264\Florida Ltr.doc

ALSO LICENSED IN

<sup>1</sup>MISSOURI

<sup>2</sup>LOUISIANA

<sup>3</sup>FLORIDA

<sup>4</sup>ARKANSAS

<sup>5</sup>MISSISSIPPI

<sup>6</sup>ALABAMA

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**ARTICLES OF ORGANIZATION  
FOR  
NLR, T LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The name of the Limited Liability Company is:

**NLR, T LLC**

**ARTICLE II – Address:**

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

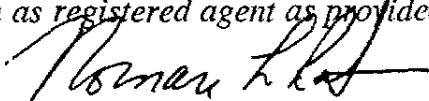
342 Emerald Ridge  
Santa Rosa Beach, FL 32459

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Norman L. Ricci  
342 Emerald Ridge  
Santa Rosa Beach, FL 32459

*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

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TALLAHASSEE, FLORIDA

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**ARTICLE IV – Management**

The Limited Liability Company is to be Member managed.

Member, Initial Chief Manager:

Norman L. Ricci  
342 Emerald Ridge  
Santa Rosa Beach, FL 32459

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.

WITNESS my hand this 12<sup>th</sup> day of JANUARY, 2005.



NORMAN L. RICCI, Member

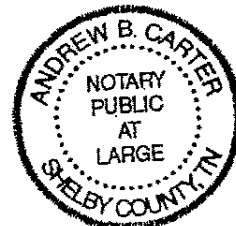
STATE OF TENNESSEE  
COUNTY OF SHELBY

BEFORE ME, the undersigned Notary Public in and for the State and County aforesaid, duly commissioned and qualified, personally appeared NORMAN L. RICCI, the within named bargainer, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged upon oath or affirmation that he executed the within instrument of his own free act and deed for the purposes therein contained.

WITNESS my hand, at office, in Memphis, Shelby County, Tennessee, on this 12 day of January, 2005.

  
NOTARY PUBLIC

My Commission Expires:



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