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Florida Department of State
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Fax Number : (850)205-0383

From:

Account Name : TRUMAN J. COSTELLO, P.A.
Account Number : I20020000024
Phone : (239)939-2222
Fax Number : (239)939-2280

LIMITED LIABILITY COMPANY

Creative Corner, LLC

Certificate of Status	1
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Florida Dept of State



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 3, 2005

TRUMAN J. COSTELLO, P.A.

SUBJECT: CREATIVE CORNER, LLC
REF: W05000005609

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

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ARTICLES OF ORGANIZATION OF CREATIVE CORNER, LLC

The undersigned, being authorized to execute and file these articles, hereby certifies that:

ARTICLE I - Name:

The name of the Limited Liability Company is: Creative Corner, LLC

ARTICLE II - Address

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

12651 McGregor Blvd. 4-403
Fort Myers, FL 33919

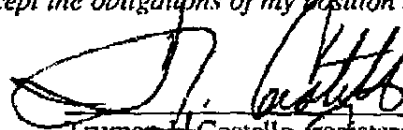
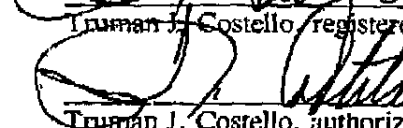
ARTICLE III -

**Registered Agent, Registered Office &
Registered Agent's Signature:**

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

Truman J. Costello, esquire
12670 New Brittany Blvd., Suite 101
Fort Myers, FL 33907

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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..


Truman J. Costello, registered agent

Truman J. Costello, authorized representative

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