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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY RUSSELL PROPERTY MANAGEMENT, LLC

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I -- Name:

The name of the Limited Liability Company is:

RUSSELL PROPERTY MANAGEMENT
LLC

ARTICLE II -- Address:

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

Principle Office Address:
13854 SE 53RD TERR

SUMMERFIELD, FL 34491

Mailing Address:
13854 SE 53RD TERR

SUMMERFIELD, FL 34491

ARTICLE III -- Registered Office, & Registered Agent's Signature:

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

ROY RUSSELL
Name
13854 SE 53RD TERR
Florida street address (P.O. Box **NOT** acceptable)
SUMMERFIELD, FL 34491
City, State, and Zip

Having been named as registered agent and to accept service of process for 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, Florida Statutes.

✓ Roy Russell
Registered Agent's Signature

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ARTICLE IV – Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:
 "MGR" = Manager
 "MGRM" = Managing Member

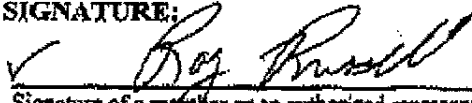
Name and Address:

<u>MGR</u>	<u>ROY RUSSELL</u>
	<u>13854 SE 53RD TERR</u>
	<u>SUMMERFIELD, FL 34491</u>
<u>MGR</u>	<u>SATHA RUSSELL</u>
	<u>13854 SE 53RD TERR</u>
	<u>SUMMERFIELD, FL 34491</u>
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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


 Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

ROY RUSSELL
 Typed or printed name of signee

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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