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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : A.B.S. OF JACKSONVILLE, INC.

Account Number : I20010000215 Phone : (904)777-1533 : (904)777-1717 Fax Number

LIMITED LIABILITY COMPANY

JRW, LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILE

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ARTICLE I. NAME:

SECRETARY OF : TALLAHASSEE, FI

The name of the Limited Liability Company is: JRW, LLC

ARTICLE II. ADDRESS:

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

4375 Confederate Point Road #236 Jacksonville, FL 32210

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

The name and Florida street address of the registered agent are: James Watson, MGR. 4375 Confederate Point Road #236 Jacksonville, FL 32210

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of 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.



F 02-19-05 Date

ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title: MGR. Name and Address: James Watson 4375 Confederate Point Road #236 Jacksonville, FL 32210

FILED

REQUIRED SIGNATURE:

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IN WITNESS WHEREOF, the undersigned member(s) has executed these Articlears OF STATE Organization, this Andrew day of February, 2005. TALLAHASSEE, FLORIDA

Zames Hander

(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.)