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Division of Corporations

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Florida Department of State
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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

LIMITED LIABILITY COMPANY
TWOMEY MAGFHLOINN, LLC

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Twomey MagFhloinn, LLC

ARTICLE II - Address:

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

2491 NE Ocean Boulevard #202
Stuart, Florida 34996

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

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

Frank A. Ferraro
Name

3601 SE Ocean Boulevard, Ste. 005
Florida street address (P.O. Box not acceptable)

Stuart, Florida 34996
City, State and Zip

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

Frank A. Ferraro, CPA, PA
3601 SE Ocean Boulevard, Ste. 005
772-283-5001

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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

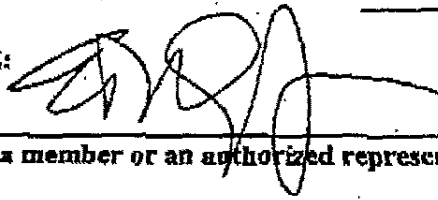
"MGRM" – Managing Member

Name and Address:

MGRM

Eileen T. McGlynn
2421 NE Ocean Blvd. #202
Stuart, Florida 34996

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 the document constitutes an affirmation under penalties of perjury that the facts stated herein are true)

Eileen T. McGlynn

Typed or printed name of signee

Frank A. Ferraro, CPA, PA
3601 SE Ocean Boulevard, Suite 005
Stuart, Florida 34996
772-283-5001

SECRETARY OF REVENUE
TALLAHASSEE, FLORIDA

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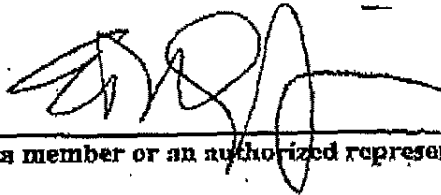
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ARTICLE IV – MANAGEMENT (Check if applicable)

X

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

(An additional article must be added if an effective date is requested)



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 the penalties of perjury that the facts stated herein are true)

Eileen T. McGivern

Typed or printed name of signer

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