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ACCOUNT NO. : 072100000032

REFERENCE: 330493 7287682

AUTHORIZATION : `

COST LIMIT : \$ 155.00

ORDER DATE: April 22, 2005

ORDER TIME : 3:39 PM

ORDER NO. : 330493-005

CUSTOMER NO: 7287682

CUSTOMER: Gail E. Muraca, Paralegal

Cohn Birnbaum & Shea P.c.

12th Floor

100 Pearl Street

Hartford, CT 06103-4500

DOMESTIC FILING

NAME: PROSPECT-MARATHON COQUINA LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

OS RROZ MITS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	%
Prospect - Marathon Coquina LLC	
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
177 Broad Street	c/o Prospect Capital Group
Stamford, CT 06901	177 Broad Street
	Stamford, CT 06901
ARTICLE III - Registered Agent, Registered Corporation Service Comp	gistered agent are:
Name	
1201 Hays Street	
Florida street address (P.O.	Box <u>NOT</u> acceptable)
Tallahassee	FLORIDA 32301
City, State, and	d 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, Florida Statutes..

Corporation Service Company

By: Cynthia L. Harris

Registered Agent's Signature

Cynthia L. Harris

as its agent

Page 1 of 2 (CONTINUED)

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 MCRM Prospect - Marathon Coquina Holdings, IJC c/o Prospect Capital Group 177 Broad Street Stamford, CT 06901 (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 the penalties of perjuty that the facts stated herein are true.)

By: Richard J. Shea, Jr., authorized representative
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)