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From:
Account Name : BASKIN & FLEECE, P.A.
Account Number : I20020000047
Phone : (727)572-4545
Fax Number : (727)572-4546

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

419 JASMINE WAY, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: 419 JASMINE WAY, L.L.C.

ARTICLE II - Address:

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

1001 South Myrtle Avenue, Suite 7
Clearwater FL 33756

ARTICLE III - Managers: The Company shall be Managed by its Managing Member, and the name and address of the Managing Member is:

JOHN C. PAGE
1001 South Myrtle Avenue, Suite 7
Clearwater FL 33756

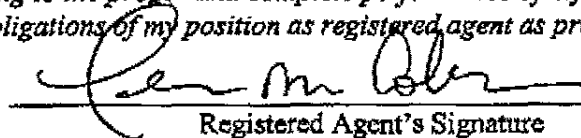
ARTICLE IV - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Kevin M. Collver
Name
13577 FEATHER SOUND DRIVE, SUITE 550
Florida street address (P.O. Box NOT acceptable)
Clearwater, FL 33762
City, State, and Zip

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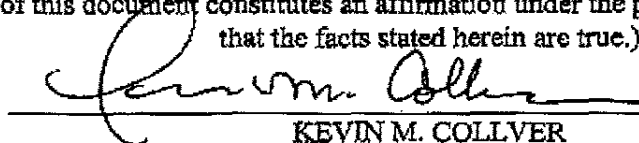
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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

(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.)



KEVIN M. COLLVER