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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number: 120010000247 Phone: (800)494-3124 Fax Number: (305)675-2811

### LIMITED LIABILITY COMPANY

#### TRUST PARTNERS INVESTMENT LLC

Certificate of Status	0
Certified Copy	0
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# ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY In compliance with Chapter 608,F.S.

#### ARTICLE I NAME

The name of the Limited Liability Company is: TRUST PARTNERS INVESTMENT LLC

#### ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:
716 BAUTZEN AVE NW
PALM BAY, FLORIDA 32907

# ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

The name and the Florida street address of the registered agent are: JEAN ST JEAN 716 BAUTZEN AVE NW PALM BAY, FLORIDA 32907

Having been named as registered agent 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.

JEAN ST JEAN Registered Agent's Signature

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### ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

#### ARTICLE V MEMBERS (optional)

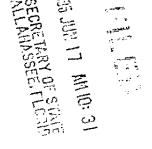
Managing Member: JEAN ST JEAN 716 BAUTZEN AVE NW PALM BAY, FLORIDA 32907

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.

JEAN ST JEAN

Typed or printed name of signee



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