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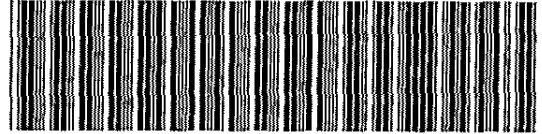
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ATLANTIC COAST TURNKEY LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LEONEL G. RUIZ

(Name of Person)

ATLANTIC COAST TURNKEY LLC

(Firm/Company)

8787 SOUTHSIDE BLVD # 4512

(Address)

JACKSONVILLE, FL. 32256

(City/State and Zip Code)

For further information concerning this matter, please call:

LEONEL G. RUIZ

(Name of Person)

at (904)

338-2227

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$125.00 Filing Fee	<input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status	<input type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	<input type="checkbox"/> \$160.00 Filing Fee Certificate of Status & Certified Copy (additional copy is enclosed)
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STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION
OF
ATLANTIC COAST TURNKEY, **LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be ATLANTIC COAST TURNKEY LLC, ("company").

ARTICLE II - ADDRESS

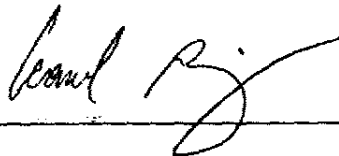
The mailing address and street address of the principal office of the company is
8787 SOUTHSIDE BLVD. # 4512 JACKSONVILLE, FL 32256

ARTICLE III - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the State of Florida is:

LEONEL G. RUIZ
8787 SOUTHSIDE BLVD. # 4512
JACKSONVILLE, FL. 32256

Having been named as registered agent and to accept service of process for the above named limited liability company at the place designated herein, I hereby accept 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 F.S. Chapter 608.



LEONEL G. RUIZ

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JUN 21 P 11
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TALLAHASSEE, FLORIDA

ARTICLE IV - EFFECTIVE DATE

The effective date of the company shall be date of filing.

ARTICLE V - Managing Members

The name and address of each managing member is as follows:

Managing Member LEONEL G. RUIZ

8787 SOUTHSIDE BLVD.# 4512
JACKSONVILLE, FL. 32256



LEONEL G. RUIZ

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