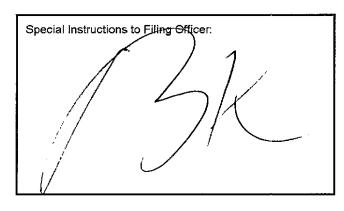
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Office Use Only



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	P.O. Box 37066 (323	315-7066) ~ (850) 22	2-2666 or (800) 969-1666 . Fax (8	50) 222-1666
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SPECIAL INSTRUCTIONS:

RUICLES OF ORGANIZATION F	OR FLORIDA LIMITED LIABILITY COM		
ARTICLE I - Name: The name of the Limited Liability Company is:			
Serendib LLC			
ARTICLE U - Address:	of the principal office of the Limited Liability Comp		
Principal Office Address:	Mailing Address:		
1105 Laguna Lane	1105 Leguna Lane		
Gulf Breeze, FL 32563	Gulf Breeze, FL 32563		
ARTICLE III - Registered Agent, Re The name and the Florida street address Pamela Klein Caneke	~ ~		
44051	TANGE		
1105 Laguna Lane Florida	a street address (P.O. Box NOT acceptable)		
Gulf Breeze, Fl 3258;	and the second s		
	~ <b>fl</b>		

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

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Romesh Canekeratne
141-01-(M)	1105 Laguna Lane
	Gulf Breeze, FL 32563
MGRM	Pamela Klein Canekeratne
MAC CONTRACT	1105 Laguna Lane
	Gulf Breeze, FL 32563
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a member	Kein Carekerathe er or an authorized representative of a member.
(In accordance with se of this decument const that the facts stated	ection 608,408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury herein are true.)
Pamela Klein Cane	keratne
T	ped or printed name of signee
Filing Fees;	
\$125.00 Filing Fee for Articles of Orgator of Registered Agent \$ 30.90 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	्र क