P 4: 0b

2005 JUL 27, SECRETARY UF STATE TALLAHASSE, FLORIDA (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT (Business Entity Name) (Document Number) Certified Copies ____ Certificates of Status Special instructions to Filing Officer: M

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July 20, 2005

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LOS ANGELES, CALIFORNIA 90017 069

TELEPHONE (213) 680-2212

TALSHILLE (213) 681-2910 TE

PLEASE REPLY FE. F. (211) A

Z. HARRY ASTOR OF COUNSEL

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

Re: Bay-Cal, LLC

Gentlemen:

We are enclosing the signed original Articles of Organization for Bay-Cal, LLC, a Florida Limited Liability Company. Also enclosed is a check in the sum of \$160 payable to the Division of Corporations in payment of the filing fee, Certificate of Status and a certified copy of the Articles of Organization. Please return all correspondence concerning this matter to the undersigned at the following address:

Mark La Bounty Astor & Phillips 800 Wilshire Boulevard, Suite 1500 Los Angeles, California 90017

I may be reached at (213) 680-9212 for any questions or additional information concerning this matter. Your anticipated cooperation is appreciated.

Very truly yours,

MLB:ds Enclosures

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED HABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Bay-Cal, LLC	•
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
James Matthew Ragen	Tammi M. Harrington
99 Kentucky Avenue	3106 N. Puente Street
Lynn Haven, FL 32444	Fullerton, CA 92835
The name and the Florida street address o	•
22.20	Name
99 Kentucky Avenue	
Florida st	reet address (P.O. Box NOT acceptable)
Lynn Haven	FL 32444
City,	State, and Zip
liability company at the place designar registered agent and agree to act in this c statutes relating to the proper and comp	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:	FILED
"MGR" = Manager	1.000	a land
"MGRM" = Managing Member		2005 JUL 27 P 4: Ob
MGRM	Andrew L. Ersek	
	625 Lemon Hill Terrace	SECRETARY OF STATE TALLAHASSEE, FLORIDA
	Fullerton, CA 92632	
MGRM	Steven L. Harrington	
	3106 N. Puente Street	
	Fullerton, CA 92835	-
, , , , , , , , , , , , , , , , , , ,		
	<u> </u>	
(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 perjury that the facts stated herein are true.)

Steven L. Harrington

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)