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From:

Account Name : CHRISTOPHER K. CASWELL, P.A.
Account Number : 105205003431
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LIMITED LIABILITY COMPANY

SHALAKO FLORIDA, LLC

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

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ARTICLES OF ORGANIZATION
OF

SHALAKO FLORIDA, LLC

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. **NAME.** The name of the Limited Liability Company is SHALAKO FLORIDA, LLC.
2. **ADDRESS OF PLACE OF BUSINESS.** The mailing address and street address of the principal office of the Limited Liability Company is 803 Goodrich Avenue, Sarasota, FL 34235.
3. **MANAGEMENT.** The Limited Liability Company is to be managed by a manager or managers.
4. **REGISTERED AGENT.** The name and address of the initial registered agent in Florida for the Limited Liability Company is Robert Atkins, 803 Goodrich Avenue, Sarasota, FL 34235..

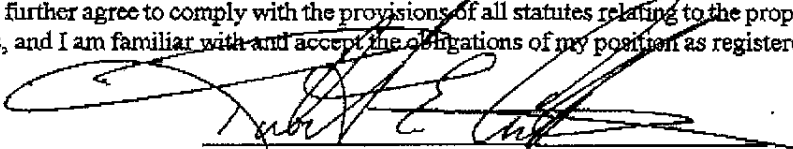
Under penalties of perjury, and in accordance with section 608.408(3), Florida Statutes, the execution of these articles constitutes an affirmation that the facts stated herein are true.

DATE OF EXECUTION: 08-10-05

By: 
Robert Atkins as member

CERTIFICATION AND ACCEPTANCE OF REGISTERED AGENT

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, the undersigned hereby accepts such an 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.


Robert Atkins, Registered Agent

PREPARER: CHRIS CASWELL
240 S. PINEAPPLE AVE., SUITE 802
SARASOTA, FL 34236
941-366-7727
FLA. BAR NO. 0371211

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