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To:

Division of Corporations

Fax Number : (850)205-0383

: GRAY, HARRIS & ROBINSON, P.A. - ORLANDO Account Name

Account Number : I20010000078 Phone : (407)843-8880 Fax Number : (407)244-5690

LIMITED LIABILITY COMPANY

Good PSR - 192 II, LLC

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J. BRYAN OCT 1 7, 2005

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Good PSR - 192 IL LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Comp. 174 West Comstock Avenue, Suite 114, Winter Park, Florida 32789.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

James Balletta GrayRobinson, P.A. 301 E. Pine Street, Suite 1400 Orlando, FL 32801

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, Florida Statutes.

Registered Agent's Signature

Article IV - Manager(s) or Managing Mainber(s):

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

Good Capital Ventures, LLC, MGRM

174 West Comstock Avenue, Suite 114 Winter Park, FL 32789

Viking Development, LLC, MGRM

10521 Oakview Pointe Terrace Gotha, FL 34734

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.)

JAMES BALLETTA
Typed or printed name of signee