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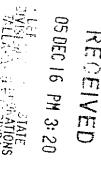
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SECREPARE OF STATE



CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
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		Officer Search
		Fictitious Search
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ARTICLES OF ORGANIZATION

FOR

FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I – Name:

The name of the Limited Liability Company is: Taddy Palm Groves, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address	Mailing Address	Mailing Address	
228 Plaza Dr., Suite D	228 Plaza Dr., Suite D	. 4	
Lehigh Acres, FL 33936	Lehigh Acres, FL 33936		

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

Name:

Donald R. Peyton

Florida Street Address:

7317 Little Road

City, State, and Zip:

New Port Richey, FL 34654

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.

DONALD R. PEYTON

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

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address
MGRM	Madhava T. Pally 228 Plaza Dr., Suite D Lehigh Acres, FL 33936

ARTICLE V - Effective Date:

These Articles of Organization shall become effective as of the date of filing with the Florida Department of State.

REQUIRED SIGNATURE:

Sign_ howally

(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.)

MADHAVA T. PALLY