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FLORIDA/FOREIGN LIMITED LIABILITY CO

Mieles Capital Management, LLC

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FAX AUDIT # 4060000048633

**ARTICLES OF ORGANIZATION
OF
Mieles Capital Management, LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Mieles Capital Management, LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 2717 Seville Blvd #16108, Clearwater, Florida 33764.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Justin C. Mieles, 2717 Seville Blvd #16108, Clearwater, Florida 33764. Located in the County of Pinellas.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2046.

ARTICLE V MANAGERS/MEMBERS


The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Justin C. Mieles, 2717 Seville Blvd #16108, Clearwater, Florida 33764

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Business Filings Incorporated, Organizer
Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr. Suite 200,
Madison, WI 53717
(608) 827-5300

FAX AUDIT # 4060000048633

FAX AUDIT # H010000048633CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Mieles Capital Management, LLC**

The name and address of the registered agent and office is Justin C. Mieles, 2717 Seville Blvd #16108, Clearwater, Florida 33764. Located in the County of Pinellas.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature: Justin C. Mieles
Justin C. Mieles

Date: 1/4/06

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