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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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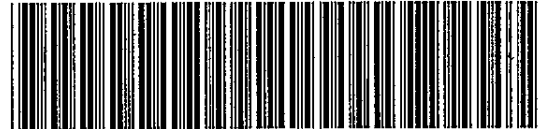
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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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## THE ALLISON FIRM, P.A.

6803 Overseas Highway  
Marathon, Florida 33050

JOHN R. ALLISON, III

TELEPHONE  
305-289-3134  
TELECOPIER  
305-289-3135  
E-MAIL  
jallison@theallisonfirm.net

January 6, 2006

### Via UPS

Secretary of State  
State of Florida  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

Re: Articles of Organization for Safe Harbour Properties, LLC

Dear Sir/Madam:

I am enclosing are two duplicate originals of executed Articles of Organization for Safe Harbour Properties, LLC, a Florida limited liability company, and my check in the amount of \$155.00 to cover the filing fee, registered agent designation and certified copy.

A self-addressed envelope is provided herewith. Thank you for your prompt attention to this matter.

Sincerely,

JOHN R. ALLISON, III

Enclosures as stated

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TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The name of the limited liability company is:

SAFE HARBOUR PROPERTIES, LLC.

**ARTICLE II – Address:**

The mailing address and street address of the limited liability company is:

6810 Front Street  
Key West, Florida 33040.

**ARTICLE III – Registered Agent, Registered Office, and Registered Agent's Signature:**

JOHN R. ALLISON, III  
6803 Overseas Highway  
Marathon, Florida 33050.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, 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.

Dated: January 6, 2006.

\_\_\_\_\_  
(Registered Agent's Signature)

\_\_\_\_\_  
JOHN R. ALLISON, III, as an authorized  
representative of a member

(In accordance with Section 608.408(3), Florida  
Statutes, the execution of this document constitutes  
an affirmation under penalties of perjury that the  
Facts stated herein are true.)

\_\_\_\_\_  
Name of Signee: John R. Allison, III

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