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| PICK-UP                                 | WAIT            | MAIL        |
| (Business Entity Name)                  |                 |             |
| (Document Number)                       |                 |             |
| Certified Copies                        | _ Certificates  | s of Status |
| Special Instructions to Filing Officer: |                 |             |
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## CAPITAL CONNECTION, INC.

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| Fields Management LL       | ASSEE, FLORID                  |
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|                            |                                |
|                            | Art of Inc. File               |
|                            | LTD Partnership File           |
|                            | Foreign Corp. File             |
|                            | 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 |
|                            | Corp Record Search             |
|                            | Officer Search                 |
|                            | Fictitious Search              |
| Signature                  | Fictitious Owner Search        |
|                            | Vehicle Search                 |
|                            | Driving Record                 |
| Requested by:              | UCC 1 or 3 File                |
| Name   1/13   12:00   Time | UCC 11 Search                  |
|                            | UCC 11 Retrieval               |
| Walk-In Will Pick Up       | Courier                        |

### ARTICLES OF ORGANIZATION OF FIELDS MANAGEMENT, LLC

These Articles of Organization are submitted for the purpose of forming a limited liability company pursuant to the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, as the same may from time to time be amended (the "Act").

#### ARTICLE I NAME

The name of the limited liability company (the "Company") is: FIELDS MANAGEMENT, LLC.

## ARTICLE II ADDRESSES

The initial mailing address and street address of the Company is 52 Charlotte Street, St. Augustine, Florida 32084.

## ARTICLE III REGISTERED AGENT

The name and street address of the initial registered agent of the Company is Sean P. Sheppard, Esq., Sheppard & Sheppard, P.A., 1301 Plantation Island Drive South, Suite 204, St. Augustine, Florida 32080.

## ARTICLE IV MANAGEMENT

The Company is to be managed by the members and is therefore, a member managed company.

#### ARTICLE V LIMITED LIABILITY

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member of the Company, has executed these Articles of Organization this 13<sup>th</sup> day of January, 2006. 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.

Sean P. Sheppard,

Authorized Representative

#### ACCEPTANCE OF REGISTERED AGENT

I, Sean P. Sheppard, on behalf of Sheppard & Sheppard, P.A., having been named to accept the service of process for FIELDS MANAGEMENT, LLC., certify that I am a permanent resident of St. Johns County, Florida, and do hereby accept to act in this capacity, and agree to comply with the laws of the State of Florida relative to keeping open said office.

DATED at St. Johns County, Florida, this 13th day of January, A.D., 2006.

SHEPPARD & SHEPPARD, P.A.

By:

Sean P. Sheppard, Attorney

STATE OF FLORIDA )
COUNTY OF ST. JOHNS )

I HEREBY CERTIFY that on this day before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared Sean P. Sheppard, authorized agent for Sheppard & Sheppard, P.A., a Florida Professional Association, on behalf of the Professional Association, to me personally known and known to be the person/entity described as the authorized agent and resident agent who executed the foregoing Articles of Organization and Acceptance of Registered Agent and acknowledged before me that he executed same.

IN WITNESS WHEREOF, I have hereunder set my hand and affixed my official seal at St. Johns County, Florida, this 13<sup>th</sup> day of January, A.D., 2006.

GLENN P. COTTER

Notary Public - State of Florida

My Commission Expires Jun 15, 2009

Commission & OD 441285

Bonded By National Notary Assn.

Notary Public, State of Florida

Printed Name:

My Commission expires: