

FROM : CLARION VENTURES, INC.

FAX NO. : (523) 455-8640

Mar. 14 2006 11:48AM '02

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**Florida Department of State
 Division of Corporations
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To:
 Division of Corporations
 Fax Number : (850) 205-0383

From:
 Account Name : CLARION VENTURES, INC.
 Account Number : 120030000026
 Phone : (623) 455-8636
 Fax Number : (623) 455-8640

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Jerry L. Overlock LLC

Certificate of Status	0
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J. BRYAN MAR 15 2006

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06 MAR 14 PM 11:21

DIVISION OF CORPORATIONS

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

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TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jerry L. Overlock LLC

ARTICLE II - Address:

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

Principal Office Address:

7949 Washington Street

Port Richey FL, 34668

Mailing Address:

7949 Washington Street

Port Richey FL, 34668

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

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

Jerry Overlock

Name

7949 Washington Street

Florida street address (P.O. Box NOT acceptable)

Port Richey,

FLORIDA 34668

City, State, and Zip

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

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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

MGRM

Name and Address:

Jerry L. Overlock
7949 Washington Street
Port Richey FL, 34668

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TALLAHASSEE, FLORIDA

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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.)

Jerry L. Overlock

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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