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(Address)

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(City/State/Zip/Phone #)

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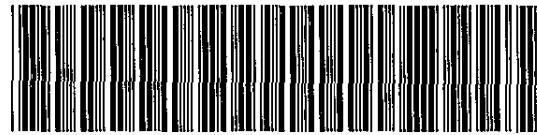
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FLORIDA

# AUSLEY & McMULLEN

ATTORNEYS AND COUNSELORS AT LAW

227 SOUTH CALHOUN STREET  
P.O. BOX 391 (ZIP 32302)  
TALLAHASSEE, FLORIDA 32301  
(850) 224-9115 FAX (850) 222-7560  
Writer's Direct Line: (850) 425-5319

March 15, 2006

Secretary of State  
Division of Corporation  
2661 Executive Center Circle, West  
Tallahassee, Florida 32301

VIA HAND DELIVERY

Re: Maclay Commerce Partners, LLC

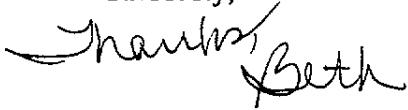
Dear Madam/Sir:

Enclosed are an original and one copy of the Articles of Organization for Maclay Commerce Partners, LLC, a limited liability company. These Articles include Registered Agent and Registered Office designation for this company. This firm's check in the amount of \$155.00 is enclosed, comprised of the \$100.00 filing fee, \$25.00 Designation of Registered Agent fee, and \$30.00 certified copy fee.

Please have someone call me at 425-5319 when the certified copy and the certificate of filing are ready and we will have our messenger return to pick them up.

Thank you in advance for assistance in these matters.

Sincerely,



Beth Dyal, Assistant to  
John T. "Tim" Leadbeater

/bd  
Enclosures

2006 MAR 15 PM  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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2006 MAR 15 PM 1:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
MACLAY COMMERCE PARTNERS, LLC**

The undersigned, pursuant to the provisions of Chapter 608, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE I.  
Name**

The name of the Limited Liability Company is **MACLAY COMMERCE PARTNERS, LLC.**

**ARTICLE II.  
Address**

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

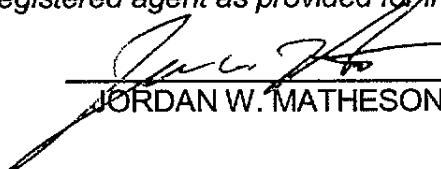
1400 Village Square Boulevard  
Unit 3-219  
Tallahassee, Florida 32312

**ARTICLE III.  
Registered Agent and Registered Office**

The name and street address of the Limited Liability Company's initial registered agent are:

Jordan W. Matheson  
1400 Village Square Boulevard  
Unit 3-219  
Tallahassee, Florida 32312

*Having been named as registered agent and as the person 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.*



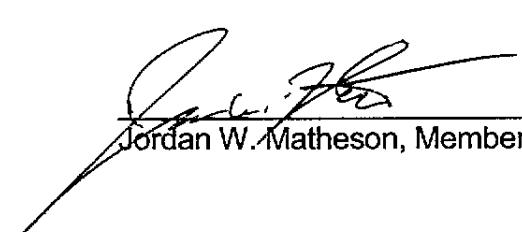
JORDAN W. MATHESON, Registered Agent

**ARTICLE IV.**  
**Management**

The Limited Liability Company shall be managed by its member(s) and is, therefore, a member-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 15 day March, 2006.

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.



Jordan W. Matheson, Member