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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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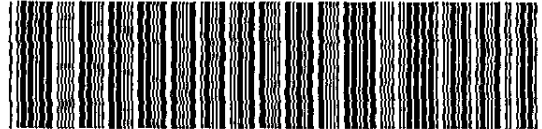
(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 041001 7384056

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : April 21, 2006

ORDER TIME : 10:20 AM

ORDER NO. : 041001-005

CUSTOMER NO: 7384056

FILED  
2006 APR 21 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: D J AVENUES, LLC

EFFECTIVE DATE:

\_\_\_\_ ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds - EXT. 2933

EXAMINER'S INITIALS: \_\_\_\_\_

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

**FILED**  
2006 APR 21 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**D J AVENUES, LLC**

**ARTICLE II - Address:**

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

**Principal Office Address:**

436 South Lakewood Run Drive  
Ponte Vedra Beach, Florida 32082

**Mailing Address:**

436 South Lakewood Run Drive  
Ponte Vedra Beach, Florida 32082

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

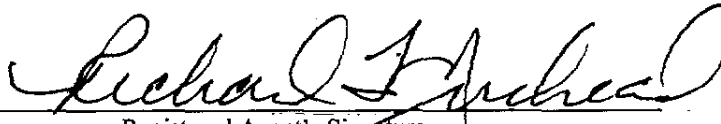
The name and the Florida street address of the registered agent are:

**Richard T. Morehead**

**444 Third Street**

**Neptune Beach, Florida 32266**

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:**

**Name and Address:**

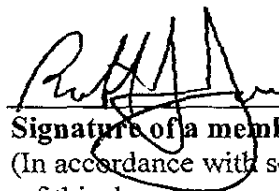
MGRM

Robert J. Jones  
436 South Lakewood Run Drive  
Ponte Vedra Beach, Florida 32082

MGRM

Matthew J. Daly  
2308 Sawgrass Village Drive  
Ponte Vedra Beach, Florida 32082

Robert J. Jones:



**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.)