KILLOORE PEARLMAN Division of Corporations FILED Florida Department of State Division of Corporations 2036 APR 28 P 1: 36 Public Access System SECRETARY OF STATE TALLAHASSEE. FLORID, **Electronic Filing Cover Sheet** DRIDA Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H06000119137 3))) Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet, . ± u5-0383 ERILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUERES 119980000007 (407)425-1020 (407)839-3635 EIGN LIMITED LIAT remier P-06 APR 28 To: Division of Corporations Fax Number From: Account Name Account Number : 119980000007 Phone Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Premier Rails System, LLC

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Certified Copy	1		
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	FAC:	SIMILE TRANSMITTAL S	HEET	VIS	190	70
TU: Division of Cor	porations	FROM: Craig S. Pearlman		N OF	APR 28	2
COMPANY:		DATE: April 28, 2006		CONP	PM	IVI
FAX NUMBER: 850-205-0383		TOTAL NO. OF PAGES INCLUDING COVER: 4			4.5	
RE: Premier Rails S	ystem, LLC	OUR FILE NUMBER:				
		C PLEASE COMMENT	D PLEASE REPLY		E REC	YCLE

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ICS APA 28 P 1: 37 SECONETANY CF STATE ALLAHASSEE. FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is PREMIER RAILS SYSTEM, LLC.

ARTICLE II – Address;

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

Principal Office Address:

5111 Ridgewood Avenue, Suite 202 Port Orange, FL 32127 5111 Ridgewood Avenue, Suite 202 Port Orange, FL 32127

Mailing Address:

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

The name and Florida street address of registered agent are:

Sandra Yates 5111 Ridgewood Avenue, Suite 202 Port Orange, FL 32127

Having been named as registered agent and to accept service of process for the above state 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, F.S..

Sandra Yates, Registered Agent

ARTICLE IV - Manager(s) or Managing Member(s)

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member

MGRM

GERALD KELLY 5111 Ridgewood Avenue, Suite 202 Port Orange, FL 32127

Name and Address:

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Apr 28 2006 16:42 P. 04 Fax Audit No. H06000119137 3 FILED JOHN R. B. KENNEDY MGRM Sill Ridgewood Avenue, Suite 202 Port Orange, FL 32127 APH 28 D 1: 37 SECREDARY OF STATE TALLAHASSEE, FLORIDA **REQUIRED SIGNATURE:** Šignao Sandra Yates Typed or printed name of signee

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Fax: 4078393635

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