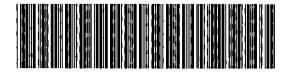
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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	⊋#)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STALLAHASSEE, FLORIDA

NOCHNICADED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

RECEIVED
DEPARTHENT OF STATE
VISION OF CORPORATION

Requester's Name  1423 N. BRONDUGH  Address  TALLAHASSEE FL 32803  City/State/Zip Phone #  CORPORATION NAME(S) & DOCUM		Office Use Only
		A SEC
(Corporation Name)	(Document #)	OF JUL 1
2. (Corporation Name)	(Document #)	FOR STATE
•		OR O
3. (Corporation Name)	(Document #)	
4(Corporation Name)  Walk in  Pick up time	(Document #)	Certified Copy
Mail out Will wait	Photocopy	Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other  OTHER FILINGS  Annual Report Fictitious Name	AMENDMENTS  Amendment Resignation of R.A. Change of Registere Dissolution/Withdra Merger  REGISTRATION/QUA Foreign Limited Partnership Reinstatement Trademark Other	, Officer/Director ed Agent awal  ALIFICATION
		Evaminar's Initials

CR2E031(7/97)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
3598 CAGNEY LLC	
ARTICLE II - Address: The mailing address and street address of the princ	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1423 NO. BRONOUGH St TALLAHASSEE, FL. 32303	- SHUE-
ARTICLE III - Registered Agent, Registered Of The name and the Florida street address of the reg	office, & Registered Agent's Signature:
The name and the Florida street address of the reg  TANEL H. G.  Name  1433 No. Bannot  Florida street address (P.O. I	PH 3: 0
TALLAHASSEE	FL 32303

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, F.S..

Registered Agent's Signature

City, State, and Zip

(CONTINUED)

i <mark>tle:</mark> /IGR" = Manager /IGRM" = Managing Member	Name and Address:
4614	JANEL H. GAY 1423 NO BRONOKGH ST TALLAHASSEE, FL 32303
· · · · · · · · · · · · · · · · · · ·	06
. •	
se attachment if necessary)	
EQUIRED SIGNATURE:	e must be added if an effective date is requested.
(In accordan of this docur that the facts	ce with section 608.408(3), Florida Statutes, the execution ment constitutes an affirmation under the penalties of perjury stated herein are true.)  ANEL H. Typed or printed name of signce
	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)