L06000070811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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CORPORATION SERVICE COMPANY®

1201 Hays Street
Tallahassee, FL 32301
850-521-1000
850-521-1010(fax)

7/17/06

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TALLAHASSEE, FLORIDA

Account Number: 072100000032

Client Account Number: 7292227

Cost Limit: 125.00

Authorization:: Lynn Coleman

Contact: Kimberly Mort x 2949

Corporation Name(s) & Document number(s)

1) DSL Development Company of Jacksonville, LLC

2) _____

3) _____

4) _____

X Stamped Copy _____ Certified Copy

Type of Filings:

New Filings	Amendment	Qualification
____ Profit	____ Amendment	___ Profit
____ NFP	_____ COA	___ NFP
X LLC	_____ Dissolution/Withdrawal	___ LLC
____ LTD	_____ Merger	___ LTD

Other:

___ Annual Report ___ Fictitious Name ___ Reinstatement

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:

DSK DEVELOPMENT COMPANY OF JACKSONVILLE, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L C.,")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
3109 Spring Glen Road #303	3109 Spring Glen Road #303
Jacksonville, Florida 32207	Jacksonville, Florida 32207

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Barker & Barker, P.A.
Name

4244 St. Johns Avenue
Florida street address (P.O. Box **NOT** acceptable)

Jacksonville FL 32210
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, F.S..

Barker & Barker, P.A.

By:
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:**
"MGR" = Manager "MGRM" = Managing Member	
MGR	Bookend Management, Inc., a Florida corporation 3109 Spring Glen Road, Suite 303 Jacksonville, Florida 32207

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

By: Mishelle Stafford

Typed or printed name of signee

Filing Fees:

$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)