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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212)431-5000
Fax Number : (212)431-1441

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

LEPRECHAUN RACING 2007 LLC

Certificate of Status	0
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Page Count	03
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Justin T. Reed
BlumbergExcelsior Corporate Services, Inc.
62 White Street
New York, NY 10013

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

LEPRECHAUN RACING 2007 LLC

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

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TALLAHASSEE, FLORIDA

Principal Office Address:	**Mailing Address:**
3825 NW 130TH AVENUE	3825 NW 130TH AVENUE
OCALA, FL 34482	OCALA, FL 34482

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

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

MIKE MULLIGAN
Name

3825 NW 130TH AVENUE
Florida street address (P.O. Box NOT acceptable)

OCALA, FL 34482
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.

X
Registered Agent's Signature

(CONTINUED)

Justin T. Reed
BlumbergExcelsior Corporate Services, Inc.
62 White Street
New York, NY 10013

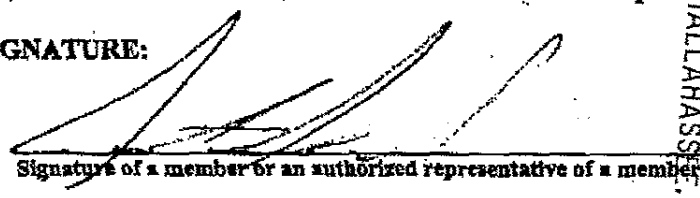
ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	MIKE MULLIGAN 3825 NW 130TH AVENUE OCALA, FL 344820

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

Justin T. Reed, Organizer

Typed or printed name of signee

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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)

Justin T. Reed
BlumbergExcelsior Corporate Services, Inc.
62 White Street
New York, NY 10013