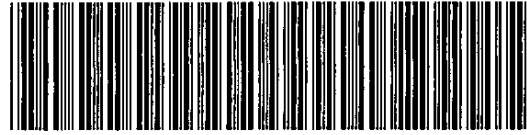


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Bonnie Quigley
ICARD, MERRILL, CULLIS, ET AL
2033 MAIN STREET
SUITE 600
SARASOTA, FL 34237



600081531856

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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**ICARD, MERRILL, CULLIS, TIMM,
FUREN & GINSBURG, P.A.**

ATTORNEYS AND COUNSELORS
2033 MAIN STREET, SUITE 600
SARASOTA, FLORIDA 34237
TELEPHONE (941) 366-8100
TOLL FREE (800) 390-3110
FACSIMILE (941) 366-6384

RICHARD S. WEBB, IV
rwebb@icardmerrill.com

REPLY TO:
P.O. BOX 4195
SARASOTA, FLORIDA 34230

November 7, 2006

Federal Express Economy

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

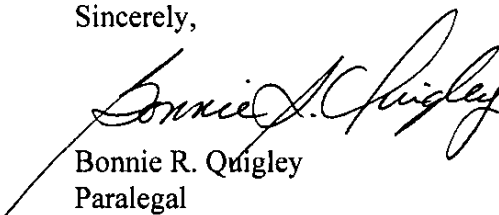
RE: Proposed filing: Fountainview Estates, LLC

Dear Madam/Sir:

Enclosed please find Articles of Organization for Florida Limited Liability Company for Fountainview Estates, LLC together with check in the amount of \$125.00 representing filing fee and Designation of Registered Agent.

Should you have any questions, please contact us direct, toll free: 1-800-390-3110. Thank you.

Sincerely,


Bonnie R. Quigley
Paralegal

brq

Encs.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Fountainview Estates, 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:

1265 Horse & Chaise Boulevard
Venice, FL 34285

1265 Horse & Chaise Boulevard
Venice, FL 34285

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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.)

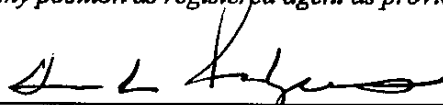
The name and the Florida street address of the registered agent are:

Sam R. Rodgers
Name

1265 Horse & Chaise Boulevard
Florida street address (P.O. Box **NOT** acceptable)

Venice FL 34285
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..



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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

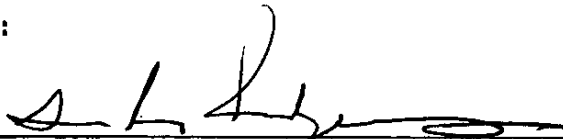
Mary A. Rodgers, Trustee of the Mary A. Rodgers
Revocable Trust dated January 27, 1995
1265 Horse & Chaise Blvd., Venice, FL 34285

(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.)

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TALLAHASSEE FLORIDA

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.)

Sam R. Rodgers

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)