

11/29/2006 WED 17:00

Division of Corporations

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Florida Department of State
Division of Corporations
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To:
Division of Corporations
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From:
Account Name : BRIAN J. WELKE PA
Account Number : I20060000150
Phone : (352)357-0400
Fax Number : (352)357-9950

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

K C PROPERTIES OF LAKE COUNTY, LLC

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DIVISION OF CORPORATION

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**ARTICLES OF ORGANIZATION
FOR
K C PROPERTIES OF LAKE COUNTY, LLC
(A Florida Limited Liability Company)**

ARTICLE I - Name:

The name of the Limited Liability Company is:

K C PROPERTIES OF LAKE COUNTY, LLC

ARTICLE II - Address:

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

17200 Peru Road
Umatilla, Florida 32784

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

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

BRIAN J. WELKE, ESQUIRE
531 North Bay Street
Eustis, Florida 32726

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 606, Florida Statutes.


Registered Agent's Signature

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

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

<u>Title:</u>	<u>Name</u>	<u>Address:</u>
MGRM	Kathleen Bastone	17200 Peru Road Umatilla, Florida 32784
MGRM	Douglas Foster	17200 Peru Road Umatilla, Florida 32784
MGRM	Crystal Nelson	5248 North Andri Drive Crystal River, Florida 34428
MGRM	George Nelson	5248 North Andri Drive Crystal River, Florida 34428

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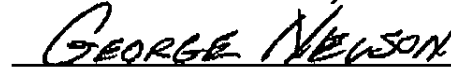
NOTE: An additional article must be added if an effective date is requested.

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.)



Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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