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(Requestor's Name)

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(City/State/Zip/Phone #)

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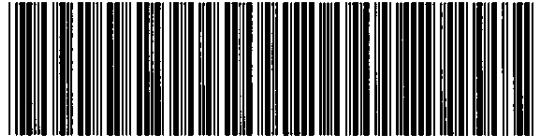
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

06 DEC 18 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 671862 7518993

AUTHORIZATION :

COST LIMIT : \$ 155.00

06 DEC 18 PM 1:09
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : December 18, 2006

ORDER TIME : 10:15 AM

ORDER NO. : 671862-015

CUSTOMER NO: 7518993

DOMESTIC FILING

NAME: BLACK DAIRY PROPERTIES, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION
FOR
BLACK DAIRY PROPERTIES, LLC
A FLORIDA LIMITED LIABILITY COMPANY

FILED
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CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I-Name:

The name of the Limited Liability Company is:

BLACK DAIRY PROPERTIES, LLC

ARTICLE II-Address:

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

STREET ADDRESS

11102 East Old Hillsborough Ave.
Suite B
Tampa, Florida 33610

MAILING ADDRESS

P. O. Box 9491
Tampa, Florida 33674

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

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

PAUL D. BARBER
6724 N. 12TH STREET
TAMPA, FL 33604

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 obligations of my position as registered agent as provided for in Chapter 608, F.S.



PAUL D. BARBER, Registered Agent

ARTICLE IV-Management

The Limited Liability Company is to be managed by one or more members and is, therefore, a member-managed company.

ARTICLE V-Managing Members(s):

The name and address of the Managing Member is as follows:

Title:

MGRM

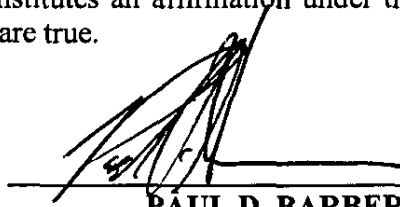
Name and Address:

PAUL D. BARBER
P. O. Box 9491
Tampa, FL 33674

ARTICLE VI-Effective Date:

This Limited Liability Company is to become effective upon listing of this certificate with the Secretary of State.

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.



PAUL D. BARBER, Organizer