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FLORIDA/FOREIGN LIMITED LIABILITY CO.

RS CAPITAL ADVISORS, LLC

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**ARTICLES OF ORGANIZATION
RS CAPITAL ADVISORS, LLC**

ARTICLE I – Name:

The name of the Limited Liability Company is RS CAPITAL ADVISORS, LLC.

ARTICLE II – Address:

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

4303 Lukow Place
Valrico, Florida 33594

ARTICLE III – Management:

The Limited Liability Company is to be managed by a manager or managers. The initial manager shall be Robert Swett Consulting, LLC, 4303 Lukow Place, Valrico, Florida 33594.

ARTICLE IV – Effective Date:

The effective date of filing of these Articles of Organization shall be January 2, 2007.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 29th day of December, 2006.



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.)

Robert E. Swett

Typed or printed name of signer

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is RS CAPITAL ADVISORS, LLC.
2. The name and the Florida street address of the registered agent are:

Robert E. Swett
4303 Lukow Place
Valrico, Florida 33594

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 am familiar with and accept the obligations of my position as registered agent.


Signature

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