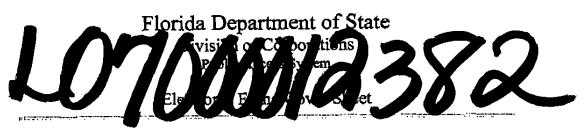
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000029391 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Fax Number

: (850)205-0383

From:

Account Name : COX & NICI

Phone

Account Number : 120000000223 : (239)254-0706

Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Charleston Investment Company, LLC

Certificate of Status	*************************************
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION CHARLESTON INVESTMENT COMPANY, LLC

ARTICLE I NAME

The name of this Limited Liability Company is Charleston Investment Company, LLC (the "Company").

The period of duration for the Company is perpetual.

The mailing address and street address of the principal office of the Company is

200 Kings Town Drive Naples, Florida 34102

ARTICLE IV REGISTERED OFFICE AND AGENT

The address of the initial registered office of this Company shall be 1185 Immokalee Road, Suite 110, Naples, Florida 34110, and its initial registered agent at such office shall be James R. Nici, Esq.

ARTICLE V **MANAGEMENT**

The Company is to be a Manager-Managed company and the name and address of the elected Managers who shall serve as Managers until the first annual meeting or until their successors are chosen are:

> Donald F. Waggoner 200 Kings Town Drive Naples, Florida 34102

Dated effective as of Feb. 137

Jarnes R. Nici

Authorized Representative

4 ,,--4

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

- 1. The name of the Company is Charleston Investment Company, LLC
- 2. The name and address of the registered agent and office is:

James R. Nici, Esq. 1185 Immokalee Road, Suite 110 Naples, Florida 34110

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 of the Florida Statutes.

Initial Registered Agent

CED-1 PM 3: 4) CRETARY OF STATE CAHASSEE FLORINA