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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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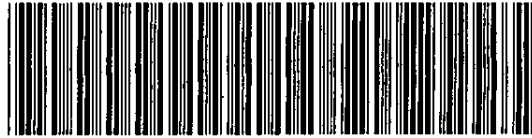
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

ARTICLES TRANSMITTAL LETTER

**To Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

Re: FORECLOSURE ALPHA FOUR, LC

The enclosed Articles of Organization , and Registered Agent Filing, are enclosed.

Please mail me back a copy of the filed documents (does not have to be certified).

Enclosed is a check for \$130.00 for Articles, Registered Agent and \$5.00 for mailing.

Please return all correspondence concerning this matter to the following:

**John M. Baker, Pres.
FORECLOSURE ALPHA FOUR, LC
806 W. Columbus Drive
Tampa, FL 33602**

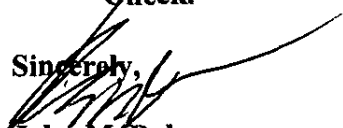
For further information concerning this matter please call:

John M. Baker 813 309 9988

Enclosures:.

**Articles of Organization: Foreclosure Alpha Four, LC
Designation of Registered Agent
Check.**

Sincerely,


John M. Baker

**ARTICLES OF ORGANIZATION
OF
FORECLOSURE ALPHA FOUR, LC**

The Undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Act, F.S. 608, does hereby make, acknowledge and file the following Articles of Organization.

ARTICLE I: NAME

The name of the limited liability company shall be:

FORECLOSURE ALPHA FOUR, LC

Hereinafter simply referred to as the "Company".

The mailing address and the street address of the principal place of business shall be as follows:

**FORECLOSURE ALPHA FOUR, LC
806 West Columbus Drive
Tampa, FL 33602**

ARTICLE II - DURATION

The Company shall commence its existence on the date it records its Articles of Organization.

The Company's existence shall terminate not later than December 31, 2012 unless the Company shall earlier dissolve as provided in its Articles of Organization and/or Regulations.

ARTICLE III: PURPOSES AND POWERS

The primary purpose of the Company is to buy and sell real estate foreclosures.

In addition, the Company shall have the power to carry out its business and affairs, including without limitation, all of those powers as set forth in Chapter 608 of Florida Statutes.

ARTICLE IV: REGISTERED AGENT AND REGISTERED OFFICE:

The Registered office and Registered agent are as follows:

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TALLAHASSEE, FLORIDA**

Registered Agent: John M. Baker
Registered Office: 806 W. Columbus Drive, Tampa, FL 33602.

ARTICLE V: MANAGEMENT:

The Company shall be managed by a manager and the name and address of the manager are as follows:

Name: PROFESSIONAL REHAB INC.
Address: 806 West Columbus Drive, Tampa, FL 33602

ARTICLE VI: ADMISSION OF ADDITIONAL MEMBERS.

The right, if given, of the members to admit additional members and the terms and conditions of such admissions shall be: No additional members shall be admitted to the Company without the written consent of 99% of the capital ownership of the Company, and upon such terms and conditions as shall be determined by all members representing 99% of the capital interest of the Company.

A member may transfer his/its interest in the Company as set forth in the Regulations of the Company, but the transferee shall have no right to participate in the management of the Company or become a member unless all the other members of the Company other than the member proposing to dispose of his/its interest approve of the proposed transfer by unanimous written consent.

ARTICLE VII: MEMBERS RIGHTS TO CONTINUE IN BUSINESS.

The Company shall be automatically dissolved by the death, insanity, bankruptcy, retirement, or expulsion of any member or member-manager without further action from the members.

ARTICLE VIII: AMENDMENTS TO ARTICLE AND REGULATIONS.

Neither the Articles of Organization for the Company, nor the Regulations of the Company, after having been once filed can be amended other than by a vote representing one hundred percent (100.00%) of the capital interest of the Company.

Signed:

PROFESSIONAL REHAB INC.
MANAGER AND MEMBER
BY JOHN M. BAKER, PRES.

A handwritten signature in black ink, appearing to read "John M. Baker", is written over the typed name.

Date of Signing: 4/8/2007

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE.

PURSUANT TO THE PROVISIONS OF FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA:

- 1. The name of the limited company is:**

FORECLOSURE ALPHA FOUR, LC

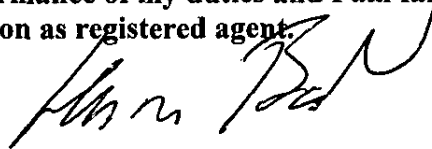
- 2. The name and address of the registered agent and office is:**

Registered Agent: John M. Baker

Registered Office: 806 W. Columbus Drive, Tampa, FL 33602.

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.

John M. Baker:



Date: 4/8/2007

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