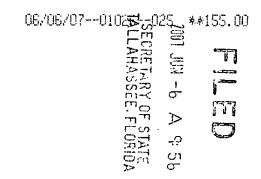
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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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* Mailing Address: P.O. Box 49948, Sarasota, FL 34230-6948

240 South Pineapple Avenue Sarasota, FL 34236 TEL 941-366-6660 FAX 941-366-3999

WWW.ABELBAND.COM

Jack M. Maag, Paralegal Writer's Direct Line: (941) 364-2728 Direct E-mail: jmaag@abelband.com Please refer to our file number:

June 4, 2007

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

Re: Shirley Ann Martin, LLC

To Whom It May Concern:

Enclosed please find original and duplicate Articles of Organization for the referenced Limited Liability Company, together with a check in the amount of \$155.00 to cover the following:

Filing of the Articles & Registered Agent fee Certified copy of the Articles \$125.00

30.00

Please return the certified copy of the Articles to the undersigned in the enclosed envelope.

Sincerely,

ABEL BAND, CHARTERED

JMM Enclosures

¿ SARASOTA, FLORIDA

VENICE, FLORIDA

TALLAHASSEE, FLORIDA

DENVER, COLORADO

٠,

ABEL BAND, CHARTERED

ARTICLES OF ORGANIZATION

SHIRLEY ANN MARTIN, LLC, a Florida limited liability company

ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

SHIRLEY ANN MARTIN, LLC

ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limite Liability Company within the State of Florida shall be:

126 Rotonda Lakes Circle, #1 Rotonda West, Florida 33947 បា

ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Shirley Ann Martin 126 Rotonda Lakes Circle, #1 Rotonda West, Florida 33947

ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Regulations of the Limited Liability Company.

| IN WITNESS WHEREOF, these Arti | cles of Organization have been executed as of the |
|---|---|
| Hessica Piccal Brint Name Jessica Piccoli Branda K Mahnaan Print Name Branda K Tohnson | Shirley Ann Martin |

"MANAGER"

TALLAHASSE OF STATE

<u>CERTIFICATE OF DESIGNATION OF</u> REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the 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: | | | |
|----|---|----------------|----------|-----------------------|
| | SHIRLEY ANN MARTIN, LLC | SECRE ALLAH | 1001 JUN | 7 |
| 2. | The name and the Florida street address of the registered agent | are | <u> </u> | i -ografia English |
| | Shirley Ann Martin | OF STATE | 2. ÷ | |
| | | - | <u> </u> | |

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: June 1, 2007

"REGISTERED AGENT"