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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

**TO: Registration Section
Division of Corporation**

SUBJECT: KFK South, LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

IVAN K. CLEMENTS, JR., ESQUIRE

(Name of Person)

Ivan K. Clements, Jr., P.A.

(Firm/Company)

149 West New York Avenue

(Address)

DeLand, Florida 32720

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Terri Rauschenberger at (386) 740-0037

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

 \$125.00 Filing Fee

X \$130.00 Filing Fee &
Certificate of Status

 \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

 \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

MAILING ADDRESS:

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

**ARTICLES OF ORGANIZATION
FOR
KFK SOUTH, LLC**

THE UNDERSIGNED MANAGING MEMBERS, for the purpose of forming a Limited Liability Company under the laws of the State of Florida, hereby files these Articles of Organization for KFK SOUTH, LLC.

ARTICLE I. Name

The name of the Limited Liability Company is KFK SOUTH, LLC.

ARTICLE II. Address

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

Principal Office Address:
210 Southridge Industrial Drive
Tavares, FL 32778

Mailing Address:
210 Southridge Industrial Drive
Tavares, FL 32778

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TALLAHASSEE, FLORIDA

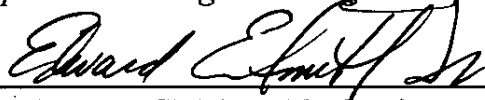
**ARTICLE III. Registered Agent, Registered Office, & Registered Agent's
Signature**

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

EDWARD E. SMITH, JR.
210 Southridge Industrial Drive
Tavares, FL 32778

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, F.S..



EDWARD E. SMITH, JR, Registered Agent's Signature

ARTICLE IV. Managing Members

The name and address of each Manager or Managing Member is as follows:

Title:

Manager/Member

Name and Address:

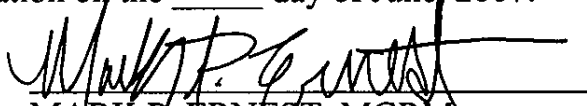
MARK P. ERNEST
210 Southridge Industrial Drive
Tavares, FL 32778

Manager/Member

EDWARD E. SMITH, JR.
210 Southridge Industrial Drive
Tavares, FL 32778

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SECRETARY OF STATE

IN WITNESS WHEREOF, the undersigned, as Managing Members, have executed the foregoing Articles of Organization on the ____ day of June, 2007.


MARK P. ERNEST, MGRM

STATE OF FLORIDA
COUNTY OF VOLUSIA

BEFORE ME, a Notary Public, personally appeared MARK P. ERNEST, to me known to be the person described as a Managing Member and who executed the foregoing Articles of Organization, and acknowledged before me that he subscribed to these Articles of Incorporation on the 14th day of June, 2007.



Theresa A. Rauschenberger
Commission # DD331797
Expires July 18, 2008
Bonded Troy Pain - Insurance, Inc. 600-365-7019

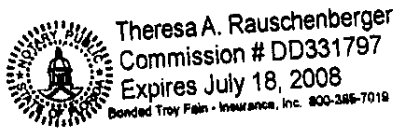

Notary Public Signature


EDWARD E. SMITH, JR., MGRM

**STATE OF FLORIDA
COUNTY OF VOLUSIA**

BEFORE ME, a Notary Public, personally appeared EDWARD E. SMITH, JR., to me known to be the person described as a Managing Member and who executed the foregoing Articles of Organization, and acknowledged before me that he subscribed to these Articles of Incorporation on the 14th day of June, 2007.


Notary Public Signature



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