

L07000097532  
FILED 8:00 AM  
September 25, 2007  
Sec. Of State  
mthomas

The name of the Limited Liability Company is:

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

The mailing address of the Limited Liability Company is:

The purpose for which this Limited Liability Company is organized is:

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

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.

Registered Agent Signature: CAROL GUSTAFSON

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
BRUCE GUSTAFSON  
9188 SCEPTER AVE  
BROOKSVILLE, FL. 34613 US

Title: MGRM  
CAROL GUSTAFSON  
9188 SCEPTER AVE  
BROOKSVILLE, FL. 34613 US

### **Article VI**

The effective date for this Limited Liability Company shall be:

09/23/2007

Signature of member or an authorized representative of a member

Signature: BRUCE GUSTAFSON

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