

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L08000006377
FILED 8:00 AM
January 17, 2008
Sec. Of State
tcline

Article I

The name of the Limited Liability Company is:
OB TROPIC ISLE LLC

Article II

The street address of the principal office of the Limited Liability Company is:
2150 GOODLETTE ROAD NORTH
NAPLES, FL. 34102

The mailing address of the Limited Liability Company is:
PO BOX 413040
ATTN: DAVID PEARSON
NAPLES, FL. 34101

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
DAVID PEARSON
2150 GOODLETTE ROAD NORTH
NAPLES, FL. 34102

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: DAVID PEARSON

Article V

The name and address of managing members/managers are:

Title: MGRM
ORION BANK
2150 GOODLETTE ROAD NORTH
NAPLES, FL. 34102

Title: MGR
DAVID PEARSON
2150 GOODLETTE ROAD NORTH
NAPLES, FL. 34102

Title: MGR
CARLA POLLARD
2150 GOODLETTE ROAD NORTH
NAPLES, FL. 34102

Title: MGR
JERRY J WILLIAMS
2150 GOODLETTE ROAD NORTH
NAPLES, FL. 34102

Signature of member or an authorized representative of a member

Signature: DAVID PEARSON

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