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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 JAN 24 PH 4:

LAW OFFICES McCLELLAND, JONES LYONS LACEY & WILLIAMS, L. L.C.

CLIFTON A. MCCLELLAND, JR. HARRY A. JONES AARON D. LYONS STEPHEN J. LACEY TIMOTHY M. WILLIAMS

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January 9, 2008

Mr. Eric A. Anderson 3360 North US Highway 1 Post Office Box 765 Mims, Florida 32754

Re: Articles of Organization of ARI Specialties, L.L.C.

Dear Mr. Anderson:

Pursuant to your telephone conversation with Mr. Jones of this date, enclosed please find an original of the Articles of Organization for the above-captioned Limited Liability Company, to be executed as noted and notarized.

After the document has been properly executed, please forward the original and one copy in the self-addressed stamped envelop which I have enclosed along you're your check in the amount of \$125.00 made payable to **Department of State** and mail directly to the Secretary of State office in Tallahassee.

In the event you have any questions, or if I may be of further assistance, please feel free to give me a call in the office.

Sincerely,

Carol F. Smith, Paralegal Asst to

Caul J. Smitl

Harry A. Jones, Esquire

Enclosures: As Noted

ARTICLES OF ORGANIZATION OF ARI SPECIALTIES, L.L.C.

The undersigned subscribers to these Articles of Organization and intending to form and create a Limited liability Company pursuant to the statues of the State of Florida, does hereby state and certify the following:

I.

The name of the Limited Liability Company shall be ARI Specialties, L.L.C.

II.

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

3660 N US 1 PO BOX 765 MIMS FL 32754

III.

The name and street address of the initial registered agent of the Limited Liability Company in the State of Florida, is:

ERIC A. ANDERSON 3660 N US 1 MIMS FL 32754

IV.

The Limited Liability Company shall be managed by its member(s) and the activities of the Limited Liability Company shall be conducted as a member-managed company in accordance with the terms of the Limited Liability Company. Operating Agreement.

V.

The Limited Liability Company shall be initially organized with six (6) members. The name and address of the Initial Members of the Limited Liability Company are:

Robert J. Anderson 3660 N US 1 **PO BOX 765** MIMS FL 32754 William R. Anderson 3660 N US 1 **PO BOX 765** MIMS FL 32754 Eric A. Anderson 3660 N US 1 PO BOX 765 MIMS FL 32754 John M. Anderson 3660 N US 1 PO BOX 765 MIMS FL 32754 Woody Donnelly 3660 N US 1 PO Box 765 MIMS FL 32754

VI.

3660 N US 1 PO Box 765

MIMS FL 32754

The Limited Liability Company shall have the right to add additional members according to the terms of the Limited Liability Company Operating Agreement.

VII.

This Limited Liability Company shall exist perpetually.

Jeremy K. Martin

IN WITNESS WHEREOF, the undersigned, in their respective capacities as initial member and initial manager for the purpose of forming a Limited Liability Company under the laws of the State of Florida, do make and file these Articles of Organization, hereby declaring and certifying that the facts herein stated are true and hereunto see their hands and seal this _____ day of _______, 2008.

Initial Members / Managers:	
ROBERT J ANDERSON	
WILLIAM R. ANDERSON	\
ERIC A. ANDÉRSON	
AlmAd-	
JOHN M. ANDERSON	
WOODY BONNELLY	
THE WIEND	
JEREMY K MARTIN	

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, ROBERT J. ANDERSON appeared, and he acknowledged executing the foregoing instrument freely and voluntarily under authority duly vested in him. Said person [__] is personally known to me or [__] presented drivers license as identification.

WITNESS my hand and official seal in the County and State last afforesaid this day of Jan., 2008.

Notary Public My Commission Expires:

Victoria Diaz - Victo

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, WILLIAM R. ANDERSON appeared, and he acknowledged executing the foregoing instrument freely and voluntarily under authority duly vested in him. Said person [is personally known to me or [is presented drivers license as identification.

WITNESS my hand and official seal in the County and State last aforesaid this day of <u>Jan</u>, 2008.

Notary Public

My Commission Expires:



STATE OF FLORIDA COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, ERIC A. ANDERSON appeared, and he acknowledged executing the foregoing instrument freely and voluntarily under authority duly vested in him. Said person is personally known to me or presented drivers license as identification.

WITNESS my hand and official seal in the County and State last aforesaid this day of San, , 2008.

Notary Public

My Commission Expires:

VICTORIA DIAZ

Notary Public - State of Finition

My Commission Expres Oct 25/2008

Commission # DD 347573

Bonded By National Notary Assn

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, JOHN M. ANDERSON appeared, and he acknowledged executing the foregoing instrument freely and voluntarily under authority duly vested in him. Said person [is personally known to me or [] presented drivers license as identification.

WITNESS my hand and official seal in the County and State last aforesaid this 18 day of 300, 2008.

Notary Public

My Commission Expires:



STATE OF FLORIDA COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, WOODY DONNELLY appeared, and he acknowledged executing the foregoing instrument freely and voluntarily under authority duly vested in him. Said person [___ is personally known to me or [__] presented drivers license as identification.

WITNESS my hand and official seal in the County and State last aforesaid this 18 day of Jan, 2008.

Notary Public

My Commission Expires:

VICTORIA DIAZ

Notary Public - State of Floridate

Ny Commission Expires Oct 29, 2008

Commission # DD 347573

Bonded By National Notary Assistance

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, JEREMY K. MARTIN appeared, and he acknowledged executing the foregoing instrument freely and voluntarily under authority duly vested in him. Said person is personally known to me or presented drivers license as identification.

WITNESS my hand and official seal in the County and State last aforesaid this day of ______, 2008.

Notary Public

My Commission Expires:

VICTORIA DIAZ

Notary Public - State of Florida

My Commission Expires Oct 29, 2008

Commission # DD 347573

Bonded By National Notary Assn.

SECRETARY OF STATE
TALL AHASSEF FLORIO

STATEMENT OF DESIGNATION AND ACCEPTANCE OF INITIAL REGISTERED AGENT AND REGISTERED OFFICE OF

ARI SPECIALTIES, L.L.C.

Pursuant to the provisions of Section 608.415, Florida Statues, the undersigned hereby files this statement of the designation and acceptance of the initial registered agent of the Limited Liability Company.

The street address of the initial registered office of this Limited Liability Company is 33660 N U.S. 1, Mims, FL 32754, and the name of the initial registered agent of this Limited Liability Company at that address is ERIC A. ANDERSON.

DATED this 18 day of 3an, 2008.

ROBERT J. ANDERSON

WILLIAM R. ANDERSON

WOODY BONNELLY

ERIC A. ANDERSON

JOHN M. ANDERSON

JEREMY K. MARTI

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

I hereby accept appointment as the registered agent of ARI Specialties, L.L.C. at the initial registered office of the Limited Liability Company at 3660 N US 1, Mims, Florida 32754

ERIC A. ANDERSON

AN 24 PM

STATE