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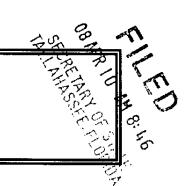
CAPITAL CONNECTION, INC.

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	Art of Inc. File
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Requested by: Name Name Signature 7 10 10 Time	Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Owner Search Vehicle Search UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval

ARTICLES OF ORGANIZATION FOR COATS FAMILY MANAGEMENT, LLC A FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I - NAME

The name of the Limited Liability Company is: COATS FAMILY MANAGEMENT, LLC

ARTICLE II - ADDRESS

The street address of the principal office of the Limited Liability Company is: 3620 Ventura

Drive, Lakeland, Florida 33807. The mailing address of the Limited Liability Company is: Post

Office Box 5260, Lakeland, Florida 33807.

ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be: Until dissolved pursuant to its Operating Agreement.

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the member. The name and address of the managing member is:

John Kevin Coats 110 Bayberry Drive Polk City, Florida 33868

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

The right, if given, of the members to admit additional members and the terms and

conditions of the admissions shall be: Additional members may be admitted only as

unanimously agreed upon by the Members as set forth in the Operating Agreement.

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining members of the limited liability company to continue the

business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member

or the occurrence of any other event which terminates the continued membership of a member in

the limited liability company shall be: Only with the consent of all the remaining Members.

IN WITNESS WHEREOF, these Articles of Organization have been signed, as Managing

Member, by: John Kevin Coats.

Dated this 27th day of March, 2008.

John Kevin Coats

Managing Member

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STATE OF FLORIDA COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 27th day of March, 2008, by **John Kevin Coats**, who has produced a Florida Driver License as identification.

J. LASMAN

deffrey M. Lasman, Notary Public Notary Public - State of Florida My Commission Expires Oct 22, 2009 Commission # DD 477734 Bonded By National Notary Assn.

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: COATS FAMILY MANAGEMENT, LLC
- 2. The name and address of the registered agent and office is:

Jeffrey M. Lasman, Esquire LASMAN LAW FIRM, P.A. 6152 Delancey Station Street, Suite 205 Riverview, Florida 33569

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.

Veffrey M. Lasman

March 27, 2008 (Date)