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EXAMINER

TALLAHASSEE, FLORIDA

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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ARTICLES OF ORGANIZATION OF SOME WAY, LLC

The undersigned, WILLIAM HOLLOWAY, as the subscriber to these Articles of Organization, hereby presents these Articles for the formation of a limited liability company under the provisions of Florida Statutes Chapter 608.

ARTICLE I. NAME OF LIMITED LIABILITY COMPANY

The name of the limited liability company shall be SOME WAY, LLC

ARTICLE II. TERM OF EXISTENCE

The existence of this limited liability company shall commence upon the date of filing of these Articles of Organization with the Department of State, State of Florida, and shall be perpetual unless earlier terminated in accordance with the laws of the State of Florida.

ARTICLE III. PRINCIPAL PLACE OF BUSINESS

The principal place of business, mailing address and initial registered office of the limited liability company shall be 4913 Milano Court NE, St. Petersburg, FL 33703 located in Pinellas County, Florida, but the limited liability company shall have the power to establish branch offices and other places of businesses at such other place or places within or without the State of Florida as may be determined and deemed expedient.

ARTICLE IV. INITIAL REGISTERED AGENT

The initial registered agent of the limited liability company shall be the following named person at the following address:

NAME OF REGISTERED AGENT:

WILLIAM HOLLOWAY

ADDRESS OF REGISTERED AGENT:

4913 Milano Court NE St. Petersburg, Florida 33703

ARTICLE V. **MANAGEMENT**

The Limited Liability Company created and formed by the filing of these Articles of Organization shall be a member-managed company. William Holloway is the initial Managing Member.

IN WITNESS WHEREOF, we, the undersigned, have hereunto set our hands and seals, acknowledged and filed the foregoing Articles of Organization under the laws of the State of Florida, this _____ day of May, 2008.

WILLIAM HOLLOWAY

STATE OF FLORIDA COUNTY OF PINELLAS

BEFORE ME personally appeared WILLIAM HOLLOWAY, to me well known and known to be the person described herein and who executed the foregoing instrument, and he acknowledged to and before me that he executed said instrument for the purposes therein expressed.

WITNESS MY HAND and official seal, this ______ day of May 2008.

My Commission Expires:



Notary Public

ACCEPTANCE BY REGISTERED AGENT

The undersigned hereby accepts the appointment as registered agent of SOME WAY, LLC which is contained in the foregoing Articles of Organization.

Dated this _____ day of May, 2008.

WILLIAM HOLLOWAY