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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BA. Thomas JUN 09 2008

KOMNINOS LAW GROUP, LLC

Attorneys at Law

(813) 251-3444 (Telephone)

(813) 251-3445 (Facsimile)

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June 3, 2008

Please Reply To:

X 8270 Woodland Center Blvd.
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□ 7320 East Fletcher Ave.
Tampa, FL 33637

□ 5225 8th Street
Zephyrhills, FL 33542

VIA US MAIL

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir/Madame:

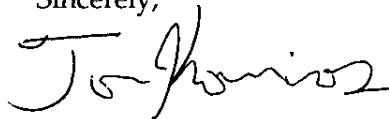
Please find enclosed:

1. The original Transmittal Letters for **Bahama Isle, LLC**;
2. One (1) original of Articles of Organization for each LLC;
3. One (1) copy of the Articles of Organization for each LLC; and
4. One (1) check in the amount of one hundred and sixty dollars (\$160.00) to cover the filing fees and to obtain a certified copy of the Articles of Organization and Certificate of Status for each LLC.

Please file the aforementioned and provide a filed copy to me along with any other information that you provide to members/managers of newly formed Florida LLC.

If you should have any questions and/or concerns, please do not hesitate to contact me directly.

Sincerely,



Tom Komninos

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Bahama Isle, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

2002 Pergola Bend Lane
Tampa, Florida 33641

Mailing Address:

Same

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Carolyn Jackson

Name

2002 Pergola Bend Lane

Florida street address (P.O. Box **NOT** acceptable)

Tampa FL 33647

City, State, and Zip

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 as provided for in Chapter 608, F.S..

Carolyn Jackson

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Name and Address:

Carolyn Jackson
2002 Pergola Bend Lane
Tampa, FL - 33641

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TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Carolyn Jackson

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CAROLYN JACKSON

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)