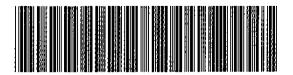
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SECRETARY OF STATE
FALLAHASSEE, FLORIG

N. Carlisson SEP 2 4 2009

COVER LETTER -

_	stration sion of C	Section Corporations	•	
SUBJECT:	M	Name of Resulting	Florida Limited Company)
	Other B	usiness Entity" into a "	ticles of Organization, Florida Limited Liabil	and fees are submitted to ity Company" in
Please return	all corr	espondence concerning	g this matter to:	
_RobE	RT E.	OWARI KERN (Contact Person) Commerca (Firm/Company)	ER, JR.	
1766	BAYO CTER	(Address) City, State and Zip Code)	BLVD NE	
		on concerning this man	• •	neu 7206
(Nam	e of Conta	act Person)	at (/ / /) 9 (Area Code and Da	ystime Telephone Number)
Enclosed is	a check f	for the following amou	nt:	
\$150.00 File (\$25 for Converse \$125 for Arrof Organization)	rsion icles	II \$155.00 Filing Fees and Certificate of Status		□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET A Registration Division of C Clifton Build 2661 Execut Tallahassee,	Section Corporat ling ive Cent	ions er Circle	MAILING A Registration S Division of C P. O. Box 633 Tallahassee, I	Section orporations 27

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
(Must end with the words "Limited Liability Company," the abl	breviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address of the pr Liability Company is:	rincipal office of the Limited
Principal Office Address:	Mailing Address:
1766 BAYOU GRANDE BLVD, NE SAINT PETERSBURG, FL 33703	1766 BAYOU GRANDEBLUD NE SAINT PETERSBURG, FL 33703
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Regist individual or another business entity with an active Florida registration.) The name and the Florida street address of the registration Name Name Florida street address (P.O. ST. PETERSBURG City, State	registered agent are: REFLORIA Box NOT acceptable) FL 33703 e, and Zip
Having been named as registered agent and to above stated limited liability company at the plane hereby accept the appointment as registered capacity. I further agree to comply with the proper and complete performance of my disaccept the obligations of my position as registered. Chapter 608, F.	ace designated in this certificate, I d agent and agree to act in this vovisions of all statutes relating to duties, and I am familiar with and distered agent as provided for in

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGEM	ROBERT E. KEENER, JR. 1766 BAYOU GRANDE BLUD NE ST. PETERSBURG, FL 33703
MGRM	KELLY M. KERNER 1766 BAYOU GRANDE BIVD NE ST. PETERSBURG, FL 33703
	(Use attachment if necessary)
ARTICLE V: Effective date, if other than the date. (The effective date: 1) cannot be prior to not document is filed by the Florida Department the effective date listed in the attached Cerdate is listed therein.)	(OPTIONAL) r more than 90 days after the date this of State; <u>AND</u> 2) must be the same as
REQUIRED SIGNATURE:	99 SEP 23 SECRETAR TALLAHASS
of this document constitutes an affir	8(3), Florida Statutes, the execution
ROBERT E. KER 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)