

12/21/2009

13:59 GARLICK, STETLER, SKRIVAN, LLP

(FAX) 239 597 6984

P.001/004

Division of Corporations

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Account Name : KENT A. SKRIVAN OF GARLICK, STETLER, SKRIVAN, LLP
Account Number : I20090000052
Phone : (239) 597-4500
Fax Number : (239) 597-6984

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FLORIDA/FOREIGN LIMITED LIABILITY CO.
Grateful Latitude, LLC

Certificate of Status	1
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Estimated Charge	\$130.00

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EXAMINER

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**ARTICLES OF ORGANIZATION
OF
GRATEFUL LATITUDE, LLC**

The undersigned acting as organizer of GRATEFUL LATITUDE, LLC, under the Florida Limited Liability Company Act, adopts the following Articles of Organization for said limited liability company.

**ARTICLE I
NAME**

The name of the limited liability company shall be GRATEFUL LATITUDE, LLC, (the "Company").

**ARTICLE II
DURATION**

This Company shall exist perpetually, unless dissolved according to law or as set forth in any Operating Agreement adopted by the Company.

**ARTICLE III
PURPOSE**

The Company is organized pursuant to the Florida Limited Liability Company Act for the purpose of conducting any lawful activity in Florida, with the powers described in the Florida Limited Liability Company Act and as set forth in the Operating Agreement adopted by the Company.

**ARTICLE IV
BUSINESS ADDRESS/MAILING ADDRESS**

The address of the place of business of the Company shall be 3280 18TH Avenue, NE, Naples, Florida 34120. The mailing address of the Company shall be 4089 West 158th Street, Cleveland, Ohio 44135.

Prepared by:
Kent A. Skrivan, Esq.
9115 Corsea del Fontana Way, Suite 100
Naples, Florida 34109
(239) 597-4500
Bar #0893552

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ARTICLE V
REGISTERED AGENT

The name and address of the Company's initial registered agent and registered office is Kent A. Skrivan, 1421 Pine Ridge Road, Suite 120, Naples, Florida 34109.

ARTICLE VII
ADDITIONAL PROVISIONS

The effective date of this limited liability company shall be upon filing

IN WITNESS WHEREOF, the undersigned has caused these Articles of Organization to be executed this 21 day of December, 2009.

By: Kent A. Skrivan

Kent A. Skrivan, authorized
representative of a member

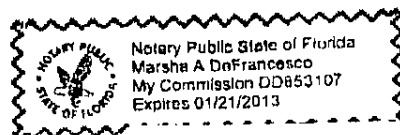
In accordance with Section 608.408(3), Florida Statutes the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.

STATE OF FLORIDA)
) ss.
COUNTY OF COLLIER)

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized to take acknowledgments, personally appeared Kent A. Skrivan, to me known to be the person described in and who executed the foregoing Articles of Organization of GRATEFUL LATITUDE, LLC. Kent A. Skrivan is ✓ personally known to me or has produced _____ as identification.

WITNESS my hand and official seal in the County and State named above, this 21st day of December, 2009.

Marsha A. DeFrancesco
Notary Public
My Commission Expires:



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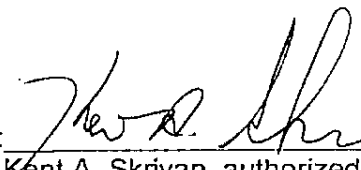
CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/RESISTERED OFFICE

In compliance with Section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered agent/registered office, in the State of Florida:

1. The name of the Limited Liability Company is GRATEFUL LATITUDE, LLC
2. The name and address of the registered agent and registered office is:

Kent A. Skrivan
Stetler & Skrivan, PL
1421 Pine Ridge Road, Suite 120
Naples, Florida 34109

By:


Kent A. Skrivan, authorized
representative of a member

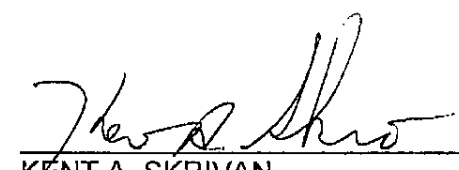
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ACCEPTANCE:

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 relative to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registered agent.


KENT A. SKRIVAN

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