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**Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

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**FLORIDA LIMITED LIABILITY CO.
RUMSON ENTERPRISES, LLC**

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

RUMSON ENTERPRISES, LLC

ARTICLE II ADDRESS

The street address of the Limited Liability Company is:

11902 BONITA BEACH ROAD SE
BONITA SPRINGS, FLORIDA 34135

The mailing address of the Limited Liability Company is:

9621 SPANISH MOSS WAY #3821
BONITA SPRINGS, FLORIDA 34135**FILED**
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TALLAHASSEE, FLORIDA**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

GUSS PAPPAS
9621 SPANISH MOSS WAY #3821
BONITA SPRINGS, FLORIDA 34135

Having been named as registered agent 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.

X



GUSS PAPPAS / Registered Agent's signature

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ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER

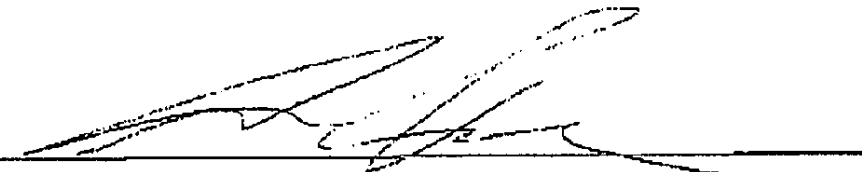
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BONITA SPRINGS, FLORIDA 34135

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.....

X 

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.

GUSS PAPPAS

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