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From:

Account Name : A.B.S. OF JACKSONVILLE, INC.

Account Number : 120010000215 : (904)777-1533 Phone

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FLORIDA LIMITED LIABILITY CO. Unleashed Underground, LLC

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D. BRUCE

JAN 11 2011

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. NAME:

The name of the Limited Liability Company is: Unleashed Underground, LLC

ARTICLE IL ADDRESS:

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

4940 Rue Street Jacksonville, FL 32258

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE. AGENT'S SIGNATURE:

The name and Florida street address of the registered agent are: Larry Todd 4940 Rue Street Jacksonville, FL 32258

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of designated in this certificate, I hereby accept the appointment as registered agent and ogree 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, Florida Statutes.

Registered Agent

ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title: MGR. Name and Address:

Larry Todd

4940 Rue Street

Jacksonville, FL 32258

ARTICLE V. EFFECTIVE DATE

The effective date of this document shall be January 10, 2011.

REQUIRED SIGNATURE:		<u></u>	
•	lac of		**************************************
IN WITNESS WHEREOF, the undersigned member(s) has executed these Article Organization, this 10 day of 2011.	(0.5) (0.5) (0.5)	0	7
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(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.)