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**Florida Department of State
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To:

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Account Name : CSH SERVICES, LLC
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FLORIDA LIMITED LIABILITY CO.

Jax Treasure Trove LLC

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AUG 10 2012

T. HAMPTON

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**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG -9 AM 7:11**ARTICLE I NAME**

The name of the Limited Liability Company is:

JAX TREASURE TROVE LLC

ARTICLE II ADDRESS

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

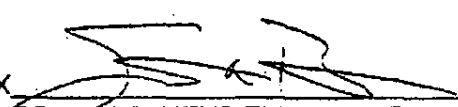
205 JOHNS GLEN DR.
JACKSONVILLE, FL 32259**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

SPENCER KENDELL BOULTER
205 JOHNS GLEN DR.
JACKSONVILLE, FL 32259

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


SPENCER KENDELL BOULTER / 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
SPENCER KENDELL BOULTER
205 JOHNS GLEN DR.
JACKSONVILLE, FL 32259

MANAGING MEMBER
MARY ELIZABETH BOULTER
205 JOHNS GLEN DR.
JACKSONVILLE, FL 32259

.....

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.

SPENCER KENDELL BOULTER

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