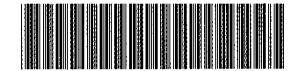
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J. SAULSBERRY EXAMINER

JAN 30 2013

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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SLEEPY HILL BLU	ES, LLC	
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		LTD Partnership File
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		Trade/Service Mark
		Merger File Art. of Amend. File RA Resignation 28
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		✓ Cert. Copy 5
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
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OF SLEEPY HILL BLUES, LLC

The undersigned executes these Articles of Organization of SLEEPY HILL BLUES, LLC to form a limited liability company pursuant to the Florida Limited Liability Company Act.

ARTICLE I, NAME

The name of the limited liability company is: SLEEPY HILL BLUES, LLC.

ARTICLE II. ADDRESS

The mailing address of the principal office of the limited liability company is Post Office Box 893, Kathleen, Florida 33849, and the street address of the principal office of the limited liability company is 958 Lake Deeson Pointe, Lakeland, Florida 33805.

ARTICLE III. REGISTERED AGENT AND OFFICE

The street address of the initial registered office of the limited liability company is 958 Lake Deeson Pointe, Lakeland, Florida 33805, and the name of the Company's initial registered agent at that address is Dale C. Hollon.

Having been named to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment of 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.

Dale C. Hollon

ARTICLE IV. MANAGEMENT OF COMPANY

The limited liability company is to be a manager-managed company. The initial Manager of the Company is Dale C. Hollon.

EXECUTED this 25 day of January, 2013.

Dale C. Hollon, an authorized representative

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