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P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	· Gı	raybaby1, LLC			
(Must contain	the words "Limited L	iability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street addr	ress of the principal of	fice of the Limited	Liability Company is:		
<u>Principal</u>	Office Address:		Mailing Address:		
259 Howell Avenue		259 I	Howell Avenue		
Brooksville, FL 34601		Broo	ksville, FL 34601		
			t's Signature:		
The Limited Liability Company ca	annot serve as its own l	Registered Agent. \		r IAS ma	
The Limited Liability Company ca nother business entity with an act	annot serve as its own I ive Florida registration	Registered Agent. \	t's Signature:	TALL SECO	,
The Limited Liability Company can nother business entity with an act	annot serve as its own I ive Florida registration dress of the registered	Registered Agent. \n.) agent are: ert G. Smith	t's Signature:	17 JPR SECING I	•
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The Limited Liability Company ca nother business entity with an act	annot serve as its own I ive Florida registration dress of the registered Robe	Registered Agent. Yon.) agent are: ert G. Smith Name Howell Avenue	t's Signature: 'ou must designate an individual or	SECRE DARY OF	
nother business entity with an act The name and the Florida street add -	annot serve as its own I ive Florida registration dress of the registered Robe	Registered Agent. Yon.) agent are: ert G. Smith Name Howell Avenue	t's Signature: 'ou must designate an individual or	17 JPR SECING I	

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 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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:		Name and Address:
"AMBR" =	Authorized Member	
"MGR" = N		
AMBR	· · · · · · · · · · · · · · · · · · ·	Robert G. Smith
		259 Howell Avenue
		Brooksville, FL 34601
	•	
		
	nent if necessary) ve date, if other than the	date of filing:
CLE V: Effects effective date i	ve date, if other than the s s listed, the date must be	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 d not meet the applicable statutory filing requirements, this date will not be
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ARTICLE IV-