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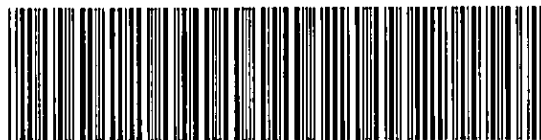
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**NAME:** LEHIGH CONSTRUCTION MANAGEMENT LLC

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X /s/ Jonathan Gagerie

JONATHAN GAGERIE / Registered Agent's signature

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**ARTICLE IV AUTHORIZED PERSON(S)**

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER

JONATHAN GAGERIE

1080 CYPRESS PARKWAY #139

KISSIMMEE, FLORIDA 34759

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X /s/ Jonathan Gagerie

JONATHAN GAGERIE / Authorized Representative's signature

*(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)*