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(Requestor's Name)

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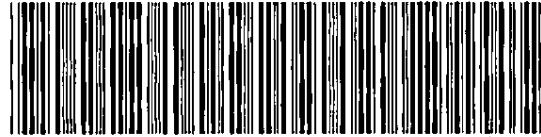
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE FL 32310

RECEIVED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
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SARASOTA 911 LLC

Signature _____

Requested by: _____

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ARTICLES OF ORGANIZATION
OF
SARASOTA 911 LLC
(a Florida Limited Liability Company)

The undersigned executes these Articles of Organization to form a limited liability company under the laws of the State of Florida, and declares that the following articles shall serve as the charter and authority for the conduct of business of the limited liability company.

ARTICLE I.
NAME

The name of the limited liability company is SARASOTA 911 LLC.

ARTICLE II.
ADDRESS

The mailing address and street address of the principal office of the limited liability company is:

Principal Office Address:

209 Bocelli Drive
Nokomis, FL 34275

Mailing Address:

209 Bocelli Drive
Nokomis, FL 34275

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

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

BRYAN CORSINI
209 Bocelli Drive
Nokomis, FL 34275

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

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accept the obligations of my position as registered agent as provided for in chapter 605, Florida Statutes.


Registered Agent Signature

ARTICLE IV.
MEMBERS

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

Title:

Name & Address:

AMBR/MGR

BRYAN CORSINI
209 Bocelli Drive
Nokomis, FL 34275

AMBR/MGR

HEATHER CORSINI
209 Bocelli Drive
Nokomis, FL 34275

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BRYAN CORSINI, Member

(This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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.)


HEATHER CORSINI, Member

(This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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.)