

**L95000000981**

**CAPITAL CONNECTION, INC.**

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

RE: Falcon Capital  
Investments, LC

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

*filed*

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 95 DEC 20 PM 2:58

FAL DEC 20 1995

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	_____	_____	_____
TIME	_____	_____	CK No. _____
BY	<u>APK</u>	_____	_____

	C.C. FEE.	DISBURSED
<input type="checkbox"/> Capital Express™	_____	_____
<input checked="" type="checkbox"/> Art. of Inc. Filo <u>LC</u>	_____	_____
<input type="checkbox"/> Corp. Record Search	_____	_____
<input type="checkbox"/> Ltd. Partnership Filo	_____	_____
<input type="checkbox"/> Foreign Corp. Filo	_____	_____
<input checked="" type="checkbox"/> ( ) Cert. Copy(s)	_____	_____
<input type="checkbox"/> Art. of Amend. Filo	_____	_____
<input type="checkbox"/> Dissolution/Withdrawal	_____	_____
<input type="checkbox"/> C U S-	_____	_____
<input type="checkbox"/> Fictitious Name Filo	_____	_____
<input type="checkbox"/> Name Reservation	_____	_____
<input type="checkbox"/> Annual Report/Reinstatement	_____	_____
<input type="checkbox"/> Reg. Agent Service	_____	_____
<input type="checkbox"/> Document Filing	_____	_____
<input type="checkbox"/> Corporate Kit	_____	_____
<input type="checkbox"/> Vehicle Search	_____	_____
<input type="checkbox"/> Driving Record	_____	_____
<input type="checkbox"/> Document Retrieval	_____	_____
<input type="checkbox"/> UCC 1 or 3 Filo	_____	_____
<input type="checkbox"/> UCC 11 Search	_____	_____
<input type="checkbox"/> UCC 11 Retrieval	_____	_____
<input type="checkbox"/> Filo No.'s, _____ Copies	_____	_____
<input type="checkbox"/> Courier Service	_____	_____
<input type="checkbox"/> Shipping/Handling	_____	_____
<input type="checkbox"/> Phone ( )	_____	_____
<input type="checkbox"/> Top Priority	_____	_____
<input type="checkbox"/> Express Mail Prep.	_____	_____
<input type="checkbox"/> FAX ( )	_____	_____
<b>SUBTOTALS</b>	_____	_____

900001668529  
 -12/22/95--01021--004  
 \*\*\*337.50 \*\*\*337.50

RECEIVED  
 95 DEC 20 AM 11 15  
 DIVISION OF CORPORATIONS

FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ _____
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____
.....	\$ _____

WALK-IN Will Pick Up 12:20 12:00

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.  
**THANK YOU**  
 from  
 Your Capital Connection

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**ARTICLES OF ORGANIZATION**  
**OF**  
**FALCON CAPITAL INVESTMENTS, L.C.**

5 DEC 20 PM 2: 58

The undersigned hereby forms a limited liability company under the Florida Limited Liability Company Act.

**ARTICLE I - NAME**

The name of the Company is FALCON CAPITAL INVESTMENTS, L.C.

**ARTICLE II - PERIOD OF DURATION**

The period of the Company's duration will commence on the date these Articles of Organization are filed by the Department of State of the State of Florida and end on June 30, 2015.

**ARTICLE III - ADDRESS**

The address of the Company is 5509-A West Friendly Avenue, Suite 101, Greensboro, North Carolina 27410.

**ARTICLE IV - REGISTERED AGENT**

The name and address of the Company's registered agent is Nancy J. Cass, 324 Hyde Park Avenue, Suite 375, Tampa, Florida 33606.

**ARTICLE V - ADDITIONAL MEMBERS**

No action or consent by the members, except the managing member or managing members will be required to admit members to the Company. Additional members and assignees of an interest in the Company will be admitted to the Company only with the written consent of the managing member or managing members, which consent may be granted or withheld in the managing member or managing members sole and absolute discretion. Terms for the admission of additional members may be set from time to time by the managing member or managing members in the exercise of absolute discretion.

ARTICLE VI - CONTINUATION OF BUSINESS

Upon the death, insanity, retirement, resignation, expulsion, bankruptcy, or dissolution of any member or the occurrence of any other event which terminates the continued membership of any member in the Company, the members representing a majority in interest of the remaining members will have the right to continue the business of the Company by written consent given within sixty (60) days of such event.

ARTICLE VII - MANAGEMENT

The management of the Company is reserved to the members. The name and address of the initial managing member is Falcon Capital Investments of North Carolina, Inc., 5509-A West Friendly Avenue, Suite 101, Greensboro, North Carolina 27410.

ARTICLE VIII - AMENDMENT

The managing member or managing members may amend these Articles of Organization from time to time with the consent of a majority in interest of the members.

ARTICLE IX - DEFINITION

For the purposes of these Articles of Organization, a majority in interest with respect to any described group of the members, means members who in the aggregate would be entitled under the Regulations of the Company, as amended from time to time, to cast a majority of the votes at a meeting at which all the Members of the described group were present and voting.

IN WITNESS WHEREOF, these Articles of Organization have been executed this 14<sup>th</sup> day of November, 1995.

MANAGING MEMBER  
FALCON CAPITAL INVESTMENTS OF  
NORTH CAROLINA, INC.

By: Steven Melton  
Steven Melton, President

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**CERTIFICATE OF REGISTERED AGENT/REGISTERED OFFICE**

95 DEC 20 PM 2:58

In accordance with Section 608.415 of the Florida Limited Liability Act, a registered agent is appointed as follows:

**FALCON CAPITAL INVESTMENTS, L.C.**, with its principal office located at 5509-A West Friendly Avenue, Suite 101, Greensboro, North Carolina 27410, has named **NANCY J. CASS, ESQUIRE**, located at its registered office at 324 Hyde Park Avenue, Suite 375, Tampa, Florida 33606, as its registered agent in the State of Florida to accept service of process within this State.

Dated: 11/14/95

MANAGING MEMBER  
FALCON CAPITAL INVESTMENTS OF  
NORTH CAROLINA, INC.

By: Steven Melton  
Steven Melton, President

**ACKNOWLEDGMENT:**

Having been named as registered agent to accept service of process for the above named limited liability company at the address designated in this Certificate, I accept the appointment as registered agent and agreed to act in this capacity.

Dated: 11/15/95

Nancy J. Cass  
NANCY J. CASS  
Registered Agent

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS**

STATE OF NORTH CAROLINA  
COUNTY OF GUILFORD

I, STEVEN MELTON, hereby declare under penalties of perjury that the following statements are true:

1. I am the duly elected president of Falcon Capital Investments of North Carolina, Inc.
2. Falcon Capital Investments of North Carolina, Inc. is the Managing Member of Falcon Capital Investments, L.C.;
3. Falcon Capital Investments, L.C. has at least two members;
4. The total amount contributed by the members is \$100.00;
5. The agreed value of property other than cash contributed by members is -0-; and
6. The total amount of cash or property anticipated to be contributed by members is \$100.00 including amounts from 4. and 5. above.

MANAGING MEMBER  
FALCON CAPITAL INVESTMENTS OF  
NORTH CAROLINA, INC.

By: Steven Melton  
Steven Melton, President

Sworn to and subscribed before me this 14<sup>th</sup> day of November, 1995.

Diane M. Lindsey  
Notary Public  
My Commission Expires: Nov. 26, 1999

L95000000981

**CAPITAL CONNECTION, INC.**

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

No. 52345

RE: Falcon Capital Investments, L.C.

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

	C.C. FEE.	DISBURSED
Capital Express™		
Art. of Inc. File		
Corp. Record Search		
Ltd. Partnership File		
Foreign Corp. File		
( ) Cert. Copy(s)		
✓ Art. of Amend. File		
Dissolution/Withdrawal		
C U S-		
Fictitious Name File		
Name Reservation		
Annual Report/Reinstatement		
Reg. Agent Service		
Document Filing		
Corporate Kit		
Vehicle Search		
Driving Record		
Document Retrieval		
UCC 1 or 3 File		
UCC 11 Search		
UCC 11 Retrieval		
File No.'s, Copies		
Courier Service		
Shipping/Handling		
Phone ( )		
Top Priority		
Express Mail Prep.		
FAX ( ) pgs.		
<b>SUBTOTALS</b>		

FILED  
 96 FEB 22 AM 11:52  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

600001725756  
 -02/27/96-01112-005  
 \*\*\*\*\*52.50 \*\*\*\*\*52.50

N. HENDRICKS FEB 22 1996

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	_____	_____	_____
TIME	_____	_____	CK No. _____
BY	<u>[Signature]</u>	_____	_____

WALK-IN Will Pick Up 2/22 1:00

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$
	\$

RECEIVED  
 96 FEB 22 AM 12:20  
 DISBURSED

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

THANK YOU  
 from  
 Your Capital Connection

CERTIFICATE OF AMENDMENT  
OF  
FALCON CAPITAL INVESTMENTS, L.C.

FILED

96 FEB 22 AM 11:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the company is FALCON CAPITAL INVESTMENTS, L.C.
2. The company's articles of organization were filed December 20, 1995.
3. Article I is hereby amended to read as follows:

"The name of the company is WESTVIEW CAPITAL INVESTMENTS, L.C."

IN WITNESS WHEREOF, this Certificate of Amendment has been executed this  
12<sup>th</sup> day of February, 1996.

By: Steven G Melton  
Steven Melton, As President  
Falcon Capital Investments of  
North Carolina, Inc.  
Managing Member

**FILE NOW: Fee after May 1, will be \$263.75**

APPROVED  
AND  
FILED

96 APR 29 PM 12:32

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILING FEE**  
\$ 238.75  
Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee  
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

**DOCUMENT #L95000000981**  
1 Name and Mailing Address of Limited Liability Company  
WESTVIEW  
FALCON CAPITAL INVESTMENTS, L.C.  
5509-A WEST FRIENDLY AVE., SUITE 101  
GREENSBORO NC 27410

1a. Principal Place of Business Address  
5509-A WEST FRIENDLY AVE., SU  
GREENSBORO NC 27410

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/20/1995	FL
City & State		City & State		4. FE# Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country	58-2223755	5. Date of Last Report
7. Name and Address of Current Registered Agent				6. Certificate of Status Desired <input checked="" type="checkbox"/> Additional Fee Required	

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent	
CASS, NANCY J 324 HYDE PARK AVE., SUITE 375 TAMPA FL 33606		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City	
		-05/02/96 - 01088 - 020 FL	

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	FALCON CAPITAL INVES,	5509-A WEST FRIENDLY AVE.,	GREENSBORO NC

11 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3) (k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address

**SIGNATURE:** *Steven G. Melton* President, Managing Member  
Steven G. Melton 4/25/96 (910)852-7766

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #



# L95000000981

WESTVIEW CAPITAL INVESTMENTS, L.C.  
5509-A West Friendly Avenue  
Suite 101 • Greensboro, N.C. 27410

City/State/Zip Phone #

Office Use Only

SECRETARY OF  
STATE  
TALLAHASSEE,  
FLORIDA

97 SEP 23 AM 9:04

FILED

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #) **300002294133--7**
3. \_\_\_\_\_  
(Corporation Name) (Document #) **-09/16/97--01036--002**  
**\*\*\*\*\*52.50 \*\*\*\*\*52.50**
4. \_\_\_\_\_  
(Corporation Name) (Document #)

CM

- Walk in       Pick up time \_\_\_\_\_       Certified Copy  
 Mail out       Will wait       Photocopy       Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials	
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**CERTIFICATE OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FILED  
97 SEP 23 AM 9:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Westview Capital Investments LC

(Present Name)


(A Florida Limited Liability Company)

**FIRST:** The date of filing of the articles of organization was 12/20/95

**SECOND:** The following amendment(s) to the articles of organization was/were adopted by the limited liability company:

Name changed effective 9/1/97 to Pegasus Capital Investments LC

Dated Sep. 1, 19 97.



Signature of a member or authorized representative of a member

Steve Melton

Typed or printed name of person signing