L9600000024 TRANSMITTAL LETTER FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

BODOO 1677696 -01/04/96--01010--001 ****299.75 ****299.75

SUBJECT:	Rainbow Run, L.L.C (Proposed limited liability con		llix)
Enclosed is an origina \$285.00 Filing Fee & Registered Agent designation	and one (1) copy of the a \$293.75 Filing Fee, Registered Agent Designation & Certificate	\$337.50 Filing Fee, Registered Agent Designation & Certified Copy	s346.25 Filing Fee, Registered Agent Designation, Certified Copy & Certificate
smegalo —	/o 224 Shopping Ave.,	iress	FILED 96 JAN -3 AN 8: 49 SECRETARY OF STATE TALLAHASSEE, FLORID
	Daytime Telep	phone number	NDA NO

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

SECRETARY OF STATE TALLAHASSEE. FLORIDA

The name of the Limited Liability Company is:

Rainbow Run, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

224 Shopping Avenue, Box 200 Sarasota, FL 34237

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

30 Years

ARTICLE IV - Management: (check and complete the appropriate statement)

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

Bruce Murphy, Mgr. c/o3533 Roxane Blvd. Sarasota, FL 34235

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

Members reserve their right to add additional members over the next 30 years. The condition terms of such membership shall be upon joint agreement by said members.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

Remaining members, upon the death, resignation, or dissolution of a member or termination of membership of a member, shall thereby continue with business as usual and will appoint additional members as necessary to continue the nature and purpose of the business.

NOTE: If no provisions are to be made in Artice V and VI remove this page before submitting for filing with the Department of State.

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of		
Rainbow Run, L.L.C.	deposes and says:	
1) the above named limited liability company has at least two members		
2) the total amount of cash contributed by the member(s) is	s <u>-2,000.00</u>	
3) if any, the agreed value of property other than cash contributed by member(s) is A description of the property is attached and made a part hereto.	s//A.	
4) the amount of cash or property anticipated to be contributed by member(s) is	s 2,000.00	
5) the total amount of 2, 3, and 4 is	\$ 2,000.00	

Signature of athember of authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CERTIFICATE OF DESIGNATION OF FILED REGISTERED AGENT/REGISTERED OFFICE 96 JAN -3 AN 8: 49

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATE THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the limited liability company is: Rainbow Run, L.L.C.
	The name and address of the registered agent and office is:
	PLAN SCHABOTZ (NAME) C/O 3533 KOXANE BIVA (P.O. BOX NOT ACCEPTABLE) Sarasota, FL 34235 (CITY/STATE/ZIP)
	(NAME)
	(P.O. Box NOT ACCEPTABLE)
	Sarasota, FL 34235
	(CITI/GIAID/ZIP)

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.

(SIGNATURE) 12/29/95
(DATE)