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PAGE, MANNINO, PERESICH, DICKINSON & MCDERMOTT

A PROFESSIONAL LIMITED LIABILITY COMPANY

ATTORNEYS AT LAW

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October 9, 1998

BILOXI OFFICE 759 VIEUX MARCHE MALL P. O. DRAWER 289 BILOXI, MS 39533 TELEPHONE: (228) 374-2100 TELECOPIER: (228) 432-5539

VIA AIRBORNE EXPRESS

Florida Department of State Registration Section Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

TELLUS THREE, LLC RE:

Dear Sir/Madame:

****285.00

Enclosed please find the following documents to be filed regarding the above-referenced limited liability company:

- Certificate of Formation; and 1.
- Designation of Registered Agent. 2.

Also, enclosed is a check made payable to the "Florida Department of State" in the amount of \$285.00, representing payment of the \$250.00 filing fee for the Certificate of Formation and payment of the \$35.00 filing fee for the Designation of Registered Agents

Although we understand that your department only offers expedited services for handdelivered filings, we would appreciate your filing this Certificate of Formation immediately upon your receipt, as our client is under a loan closing deadline. Further, in order to assist you with our request, we have enclosed herewith a self-addressed Airborne Express package for the Letter

Acknowledgment. Name

Availability

you should have any questions or comments in connection with this matter, please do Documentot hesitate to contact us. With great appreciation, we remain

Examiner

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-Enclosures

Sincerely yours,

PAGE, MANNINO, PERESICH, DICKINSON & McDERMOTT, PLLC

Sandy L. Jackson, Paralegal

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TELLUS THREE, LLC

ARTICLE II - Address:

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

333 FOREST DRIVE SANDESTIN, FLORIDA 32451

ARTICLE III - Duration:

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

PERPETUAL

98 OCT 12 PH 12: 20
SECRETARY OF STATE
TAILAHASSEE, FLORIDA

ARTICLE IV - Management: (Check the appropriate box and complete the 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:

T. DAVIS GORDON
333 FOREST DRIVE
SANDESTIN, FL 32541

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:

N/A

ARTICLE V - Admission of Additional Members:

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

N/A

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:

N/A

ARTICLE VII - Affidavit of Membership and Contributions		SECRETARY OF STATE TALLAHASSEE, FLORID	98 OCT 12 PM 12: 2	FLED	* =
The undersigned member or authorized representative of a member of	rtifies:	<u> </u>	<u> </u>		 -
 the above named limited liability company has at least one member; the total amount of cash contributed by the member(s) is 	\$ <u>6</u> ,	900.	00	;	
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.); and	\$	-0-	-	;	
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is	<u>\$ 6,</u>	900.	00	•	; - #*

Signature of a member or an 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.)

T. DAVIS GORDON

Typed or printed name of signee

Filing Fee: \$250.00 for Articles and Affidavit

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	of the limited liability company is:	EC B
<u> </u>	TELLUS THREE, LLC	AHAS
2. The name	and the Florida street address of the registered agent are:	RY OF STATE SSEE, FLORIDA
	NAME	
	EDDINS, RIDLEHOOVER & BARNES 900 NORTH PALAFOX STREET	
	Florida street address (P. O. Box NOT ACCEPTABLE)	•
	PENSACOLA, FL 32501-5681	
	CITY, STATE AND ZIP	
limited liability appointment the provision.	named as registered agent and to accept service of process for the lity company at the place designated in this certificate, I hereb as registered agent and agree to act in this capacity. I further agree to s of all statutes relating to the proper and complete performance of my vith and accept the obligations of my position as registered agent.	y accept the comply with

Filing Fee: \$ 35 for Designation of Registered Agent

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