

L02000003/396

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

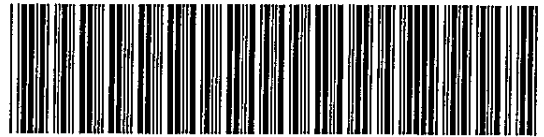
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11/21 FL LLC

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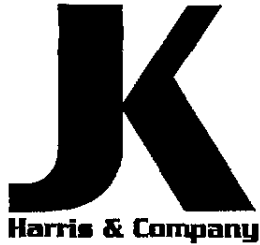


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November 13, 2002

Honorable Jim Smith  
Secretary of State  
Capitol, Plaza Level, Rm. 2  
Tallahassee, FL 32399

RE: Sparkworks, LLC

Dear Honorable Jim Smith:

Enclosed for filing please find an original and one (1) copy of the Articles of Organization in reference to the above-captioned matter. Please file and return the stamped copy back to me. Also enclosed is a money order in the amount of \$125.00 to cover the filing fees of the Article.

Sincerely,

A handwritten signature in black ink that reads 'David Geen'.

David Geen  
Ext. 279

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: Sparkworks, LLC

**ARTICLE II - Address:**

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

1784 NW 39th Place  
Oakland Park, FL 33309

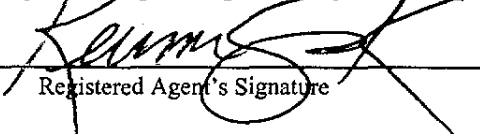
**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Kevin Spark  
Name  
1784 NW 39th Place  
Florida street address (P.O. Box **NOT** acceptable)  
Oakland Park FL 33309  
City, State, and Zip

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*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 as provided for in Chapter 608, F.S.*

  
Registered Agent's Signature

**Article IV - Management (Check box if applicable.)**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fees:**

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)