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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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[illegible] CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN APR 16 2004

Registration Section
Division of Corp.
P.O. Box 6327
Tallahassee, FL. 32314

Alivening, LLC
Glenn Smyly
P.O.Box 1368
Land O' Lakes, FL.
34639
813-996-3659

Dear Sirs:

Enclosed please find check # 8283 for application fees to register Alivening, LLC in the state of Florida.

Please apply fees as follows:

$100.00 filing fee for articles of organization
25.00 designation of registered agent
30.00 certified copy
5.00 certificate of status

Thank you.

Glenn Smyly

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OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Alivening, LLC
(Name of Limited Liability Company)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Glenn Smyly
(Name of Person)

Alivening LLC
(Firm/Company)

P.O. Box 1368
(Address)

Land O Lakes FL. 34639
(City/State and Zip Code)

For further information concerning this matter, please call:

Glenn Smyly at (813) 996-3659
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
2004 APR -9 AM 8:
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:
The name of the Limited Liability Company is:

Alivening, LLC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

23049 geneva Rd
Land O Lakes. FL.
34639

Mailing Address:

P.O. Box 1368
Land O'Lakes, FL.
34639

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

Glenn Smyly
Name

23049 geneva Rd
Florida street address (P.O. Box **NOT** acceptable)

Land O'Lakes FLORIDA 34639
City, State, and 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 as provided for in Chapter 608, Florida Statutes..

Glenn Smyly
Registered Agent's Signature

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TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	**Name and Address:**
Glenn Smyly MGR	Glenn Smyly 23049 Geneva Rd. Land O Lakes, FL. 34639
MGR	Barbara Smyly 23049 geneva Rd Land O' Lakes, FL 34639
N/A	N/A
N/A	N/A

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Glenn A. Smyly
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.)

Glenn A. Smyly
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)