

L04000065878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP

WAIT

MAIL

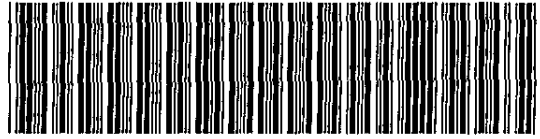
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF REGULATION
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REGISTRY OF STATE
TALLAHASSEE, FLORIDA
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FILED

GRAY | ROBINSON
ATTORNEYS AT LAW

SUITE 600
301 SOUTH BRONOUGH ST. (32301)
POST OFFICE BOX 11189
TALLAHASSEE, FL 32302-3189
TEL 850-222-7717
TEL 850-577-9090
FAX 850-222-3494
FAX 850-577-3311
gray.robinson.com

CLERMONT
KEY WEST
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MELBOURNE
ORLANDO
TALLAHASSEE
TAMPA

jkobetitsch@grayrobinson.com
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TALLAHASSEE, FLORIDA

September 3, 2004

Division of Corporations
George Firestone Building
409 East Gaines Street
Tallahassee, Florida 32301

Via Hand Delivery

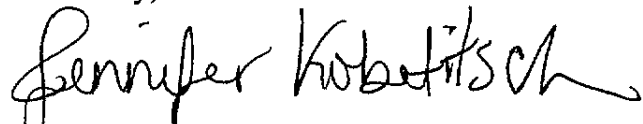
To Whom It May Concern:

Enclosed for filing, please find the **ARTICLES OF ORGANIZATION**, along with a check in the amount of **\$155.00** for the applicable filing fees and for a **CERTIFIED COPY** for the following entity:

CHUBBY, LLC

Upon receipt, please "date stamp" the copy of this letter provided, and call me at 222-7717, when the document is ready. Thank you for your assistance in this matter.

Sincerely,



Jennifer Kobetitsch
Office Administrator

/jck
Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CHUBBY, LLC

ARTICLE II - Address:

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

Mailing Address

P.O. Box 770340
Naples, Florida 34107

Street Address

8111 Bay Colony Drive, Suite 1401
Naples, Florida 34108

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

James Balletta

Name

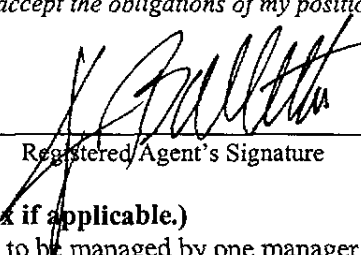
c/o Gray Robinson, P.A., 301 E. Pine Street, Suite 1400

Florida street address (P.O. Box NOT acceptable)

Orlando, Florida 32801

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.


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.)

James Balletta

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)