

U5000043419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

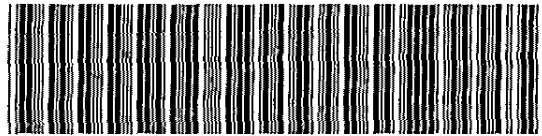
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



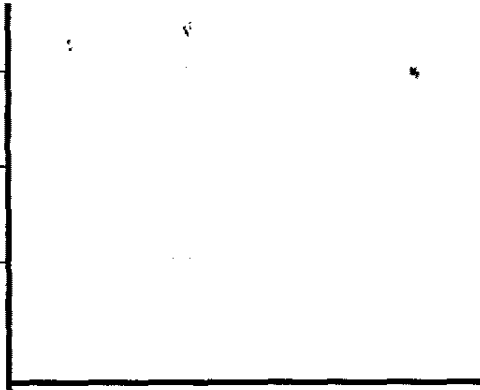
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05 MAY -3 PM 1:36 05 MAY -3 PM 1:23
SECRETARY OF STATE TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

Anthony L. Cuticello
 Requester's Name
 3101 AZRA TRAIL
 Address
 Tallahassee FL 32309 850-508-5067
 City/State/Zip Phone #



Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. SKYE INVESTMENTS, L.L.C.
 (Corporation Name) (Document #)
2. _____
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

**SKYE INVESTMENTS, L.L.C.
ARTICLES OF ORGANIZATION**

ARTICLE I - Name: **SKYE**
The name of the Limited Liability Company is **INVESTMENTS, L.L.C.**

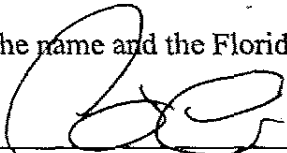
ARTICLE II - Mailing Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office and Mailing Address:

3101 Azra Trail
Tallahassee, FL 32309

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

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



ANTHONY L. CONTICELLO
3101 Azra Trail
Tallahassee, FL 32309

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..

ARTICLE IV- Manager(s) or Managing Member(s):

This shall me a Member managed company, and the name and address of each Manager or Managing Member is as follows:

ANTHONY L. CONTICELLO
3101 Azra Trail
Tallahassee, FL 32309
MGRM

STACEY M. CONTICELLO
3101 Azra Trail
Tallahassee, FL 32309
MGRM

REQUIRED SIGNATURE:



ANTHONY L. CONTICELLO
3101 AZRA TRAIL
MGRM

Date: May 2, 2005

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.