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D. BRUCE, JUN 2 4 2010 EXAMINER

COVER LETTER

Registration Section

Division of Corporations SUBJECT: Blue Sky Solutions SW FLA, LLC. Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Andrew Scott Epstein, Esquire Name of Person Andrew S. Epstein, P.A. Firm/Company 2120 McGregor Boulevard Address Fort Myers, Florida 33901 US City/State and Zip Code drew@andrewepstein.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Andrew Scott Epstein, Esquire Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$160.00 Filing Fee, □\$125.00 Filing Fee **□**\$130.00 Filing Fee & ■\$155.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street/Courier Address **Mailing Address** Registration Section Registration Section Division of Corporations **Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Lia	bility Company is:		
Blue Sky Solutions SW I			
(Must end with the	ne words "Limited Liability C	Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stree	et address of the princ	ipal office of the Limited	l Liability Company is
Principal Office Address:	<u>N</u>	<u> 1ailing Address:</u>	
17528 Allentown Road Fort Myers, Florida 33967, US		P.D. BOX 587 Estero. PL 3397	29
2120 Mo	et serve as its own Registered registration.) eet address of the registration. Scott Epstein, Esquir Name Gregor Boulevard Florida street address	Agent. You must designate an istered agent are: e (P.O. Box NOT acceptable)	ndividual or another 10 JUN 23 AH 9: 16 LEARASSEE, FLO
Fort Myer	'S F	L 33901	-

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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

The name and address of each Manager or Managing Member is as follows:

	nager	Name and Address:
"MGRM" = N	Managing Member	
MGRM		Lisa Marie Young
		17528 Allentown Road
		Fort Myers, Florida 33967, US
<u> </u>		
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(Use attachme	ent if necessary)	
TEV. Efforti	va data if other than the	e date of filing: (OPTIONA
CLE V: Effecti	ve date, if other than the listed, the date must l	e date of filing: (OPTIONA be specific and cannot be more than five business day
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effective date is O days after the	listed, the date must be date of filing.) SIGNATURE:	per of an authorized representative of a member. Section 608.408(3), Florida Statutes, the execution attitutes an affirmation under the penalties of perjury
effective date is 0 days after the	signature of a member of this document constitute that the facts stated here.	per of an authorized representative of a member. Section 608.408(3), Florida Statutes, the execution attitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)