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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 23, 2007

SALVATORE J BASILE 10555 GREENSPRINGS DR TAMPA, FL 33626

SUBJECT: SRS PROPERTIES, LLC

Ref. Number: W07000052504

We have received your document for SRS PROPERTIES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P97000067358.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Gina McLeod Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Letter Number: 207A00062289

· COVER LETTER

Division of Co			
SUBJECT: SRS F	Properties, LLC		
Sobject.		ted Liability Company)	
The enclosed Articles o	f Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
Salvatore	J. Basile		
		(Name of Person)	
SRS Prop	erties, LLC		
		(Firm/Company)	
10555 Gre	eensprings Dr.		
		(Address)	
Tampa, Fl	33626		
	(Ci	ity/State and Zip Code)	
For further information	concerning this matter, pleas	se call:	
Salvatore J. Ba	asile	at (813) 920-4525	5
(Name	of Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is:

SRS Properties, LLC (Must end with the v	SJB	Realty	LLC.	
(Must end with the v	vords "Limited Lia	ability Company, "L.I	C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	address of the	principal office	of the Limited Li	ability Company is:

Dringing Address

Frincipal Office Address:	<u>Maning Address:</u>
10555 Greensprings Dr.	10555 Greensprings Dr.
Tampa, FI 33626	Tampa, FI 33626

Mailing Address

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:	
Salvatore J. Basile)7 N
Name	NON
10555 Greensprings Dr.	را ا
Florida street address (P.O. Box NOT acceptable)	
Tampa, FI 33626 _{FL}	AH IO:
City, State, and Zip	ل 2

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 (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:

MGR	Salvatore J. Basile
	10555 Greensprings Dr.
	Tampa, FI 33626
MGR	Michael Scott Jones
	10553 Greensprings Dr.
	Tampa, FI 33626
MGR	Richard W. Schultz
	3615 Belcher Dr.
	Tampa, FI 33629
Use attachment if necessary)	
E. W. Effective data if other than	the date of filing: (OPTI

REQUIRED SIGNATURE:

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.)

Salvatore J. Basile

Typed or printed name of signee

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)

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