L0000000009571 eSUMMIT

July 26, 2000

Registration Section Division of Corporations State of Florida PO Box 6327 Tallahassee, FL 32314

900003347559--2 -08/07/00--01099--014 ****125.00 ****125.00

Re: Incorporation

Dear Sirs/Ms.:

Enclosed is our completed "Articles of Organization For Florida Limited Liability Company" form along with a check in the amount of \$125.00. Please process our application and return a confirmation to us.

If you have any questions, you can reach me at 863-816-0016.

Best regards,

Everett Atwell

Managing Partner

47th 819

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: e Summit Copital Group LLC

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

ARTICLE II - Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:	
The name and the Florida street address of the registered agent are:	
Everett Atwell	
Everett Atwell 3811 W. Sligh Avenue	
Florida street address (P.O. Box NOT acceptable) (ampa FL 33614	
City, State, and Zip	
Having been named as registered agent and to accept service of process for the above stated line liability company at the place designated in this certificate, I hereby accept the appointment as	
and agree to act in this capacity. I further agree to comply will the provision	s oj un
statutes relating to the proper and complete performance of my duties, and I am familiar with a accept the obligations of my position as registered agent as provided for in Chapter 608, F.S	ına
accept the obligations of my position as registered again in pro-	3
Registered Agent's Signature	
The Management (Check box if applicable)	- -
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and	d is,
The second managed company	ũ
e de la companya del la companya de	
(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.)	
Vern Schroeder	

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)

La transfer