

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • (800) 342-8062 • Fax (850) 224-1222

L00000011988

Equipment Leasing, LLC

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-10/03/00--01018--004
***125.00 ***125.00

- Art of Inc. File
- LTD Partnership File
- Foreign Corp. File
- L.C. File
- Fictitious Name File
- Trade/Service Mark
- Merger File
- Art. of Amend. File
- RA Resignation
- Dissolution / Withdrawal
- Annual Report / Reinstatement
- Cert. Copy
- Photo Copy
- Certificate of Good Standing
- Certificate of Status
- Certificate of Fictitious Name
- Corp Record Search
- Officer Search
- Fictitious Search
- Fictitious Owner Search
- Vehicle Search
- Driving Record
- UCC 1 or 3 File
- UCC 11 Search
- UCC 11 Retrieval
- Courier

SECRETARY OF STATE
TALLAHASSEE FLORIDA

00 OCT -3 AM 11:18

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DIVISION OF CORPORATION

00 OCT -3 AM 10:01

RECEIVED

L00-11988
JK

Signature _____

Requested by: _____

IS

Name _____

Date _____

Time _____

10/3/00 9:13

Walk-In _____

Will Pick Up _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 – Name:

The name of the Limited Liability Company is:

Equipment Leasing, L.L.C.

ARTICLE II – Address:

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

**1601 Sahlman Dr.
Tampa, Florida 33605**

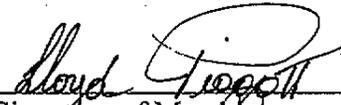
ARTICLE III – Registered Agent:

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

**Mr. Herb Wiesen
1601 Sahlman Dr.
Tampa, Florida 33605**

ARTICLE IV – Management:

The Limited Liability Company is to be a member-managed company.

✓ 

Signature of Member

Mr. Lloyd Piggott
Print Name of Member

LLLOYD PIGGOTT
Date 9/27/00

(In accordance with Section 608, Florida Statutes, the execution of this affidavit and Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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00 OCT -3 AM 11:18
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TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: **Equipment Leasing, L.L.P.**
2. The name and Florida street address of the registered agent are:

**Mr. Herb Wiesen
1601 Sahlman Drive
Tampa, Florida 33605**

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TALLAHASSEE, FLORIDA

00 OCT -3 AM 11: 18

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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 appointment as registered agent and agree to act in this proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Signature

Mr. Herb Wiesen
Print Name of Signing Party

HERB WIESEN
Date 9/29/00