LOIOOOOOOOO139 3450 N. GULF SHORE BOULEVARD SUITE 507

NAPLES, FLORIDA 34103

Secretary of State Registration Section Division of corporations Box 6327 Tallahassee, Florida 32314

Dear Sir or Madam:

Please find enclosed our Articles of Organization for Cottage Classics LLC as well as our check in he amount of \$125 for our filing fee and designation of registered Agent.

You may contact me at:

10000351S451--2 -01/02/01--01134--009 ****125.00 ****125.00

Margie McDermott
129 N. Frank Lloyd Wright Lane
Oak Park, Illinois 60302

708-445-0686

201-1139



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

January 5, 2001

MARGIE MCDERMOTT 129 N. FRANK LLOYD WRIGHT LANE OAK PARK, IL 60302

SUBJECT: COTTAGE CLASSICS LLC

Ref. Number: W0100000387

OF JANI 22 PH 5: 00

We have received your document for COTTAGE CLASSICS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6020.

Tammi Cline Document Specialist

Letter Number: 601A00000759

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: COTTAGE CLASSICS LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 3450 N GULF SHORE BLVD SOUTE SOF NAPLES FL 34103 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
MARGIE Mc DER MOTT 3450 N. GULF SHORE BLVD SUITE 507 Florida, street address (P.O. Box NOT acceptable) NAPLES FL 34103 City, State, and Zip
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
* Main Mounds Registered Agent's Signature
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.
(An additional article must be added if an effective date is requested) 3 3
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.)
Typed or printed name of signee
<u>Filing Fees:</u> \$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)