L01000003873

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 200903789662--6 -022877-0067-005 *****125.00 ****125.00

RE: ARTICLES OF INCORPORATION DREAM HORSE SALES

To whom it may concern:

Enclosed are the Articles of Organization for a Florida Limited Liability Corporation along with my check for \$125.00 for the filing fee and designation of registered agent. My partner and I both listed our names as Registered Agents. Please use my name address as the main mailing address and contact person. Please do not hesitate to contact me on the cell phone at (941)726-1960.

Best regards,

Kathleen Burrell

R.E. PRINE, JR. CONSTRUCTION

P.O.Box 7553 • Bradenton, FL 34210

101-3873



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 2, 2001

KATHLEEN BURRELL PO BOX 7553 BRADENTON, FL 34210

SUBJECT: DREAM HORSE SALES, LLC

Ref. Number: W01000004806

We have received your document for DREAM HORSE SALES, 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):

Only 1 person can be listed as registered agent.,

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: 301A00013003

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
DREAM HORSE SALES, LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Com 660 384 AUE. C.L. WEST BLADENTON, FL 34209	pany is:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature	; u · -
The name and the Florida street address of the registered agent are:	
KATHLEEN BURRELL	
Name	
Florida street address (P.O. Box NOT acceptable)	
BRADWING FL FL 34209	-
City, State, and Zip	
Having been named as registered agent and to accept service of process for the above state liability company at the place designated in this certificate, I hereby accept the appointment registered agent and agree to act in this capacity. I further agree to comply with the provis statutes relating to the proper and complete performance of my duties, and I am familiar was accept the obligations of my position as registered agent as provided for in Chapter 608, From Registered Agent's Signature	r as sions of all ith and
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers therefore, a manager - managed company.	ECRET/
(An additional article must be added if an affective date is requested) Signature of a member or an authorized representative of a member.	I 3 PM 4: 12 NRY OF STATE SSEE, FLORIDA
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affurmation under the penalties of perjury that the facts stated herein are true.)	TE 2

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)