Lee OLOC	0005880
Requester's Name Sold Address Address City/State/Zip Phone #	192 P 34 1/5
CORPORATION NAME(S) & DOCUM	- 19 1 -
1(Corporation Name)	(Document #)
3(Corporation Name)	(Document #)
(Corporation Name) Walk in Pick up time Mail out Will wait	(Document #) Certified Copy Photocopy Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other
CR2E031(7/97)	Examiner's Initials

Florida Department of State. To whom it May Concern: Please Contact me with Questions Regarding this Application for A Florida LLC. Joel Smith 127-712-3217 1805 Oak Ridge Rd 1805 Dak Ridge Rd.
Sofety Harbor, FL.
34695
PH 0



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 30, 2001

JOEL SMITH 1805 OAK RIDGE ROAD SAFETY HARBOR, FL 34695

SUBJECT: PACIFIC COAST MARKETING OF FLORIDA LLC

Ref. Number: W01000007169

We have received your document for PACIFIC COAST MARKETING OF FLORIDA 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: 801A00019094

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Pacific Coast Marketing of Florida LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 1805 Oak Ridge Rd Safety Harbor, FL 34695
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
A C ' I
- Joel Smith
1805 Oak Ridge Ro Florida street address (P.O. Box NOT acceptable) Safety Harbor FL 34695 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 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) 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
Filing Food

\$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)