CÒRPORATE \ ACCESS, /

01000001934

236 East 6th Avenue . Tallahassee, Florida 32303

INC. P.O. Box 37066 (32315-7066)

~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN PICK UP 5/18/01

CERTIFIED COPY	CUS
I.) CORPORATE NAME & DOCUMENT #)	Sixteen, LLC
2.)(CORPORATE NAME & DOCUMENT #)	3000042714037 -05/18/0101053023 ****125.00 ****125.00
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	518-01



Secretary of State

May 18, 2001

CORPORATE ACCESS, INC.

SUBJECT: FOG PARTNERS SIXTEEN, L.L.C.

Ref. Number: W01000011383

We have received your document for FOG PARTNERS SIXTEEN, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following:

The name of the limited liability company must be listed in Article I.,

The document must contain both the street address of the principal office and the mailing address of the entity.

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) 487-6025.

Trevor Brumbley Document Specialist

Letter Number: 901A00030546

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A TOTAL OF THE Manner
ARTICLE I - Name: The name of the Limited Liability Company is:
The name of the Limited Liability Company is: FOG PARTNERS SIXTEEN, L.L.C.
• • • • • • • • • • • • • • • • • • • •
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
1745 W. Fletcher Avenue
1745 W. PTETOLEN - IN
TAMPR, FC-336/2
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Michael P. Rice
Name
1745 W Fletcher Avenue
Florida street address (P.O. Box NOT acceptable) Tampa FL 336/2 City, State, and Zip
City, State, and Zip
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.
TAS ~
(An additional article must be added if an effective date is requested) Signature of a rember or an authorized representative of a member.
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
Of this goantifette additionage are arrangement.
Michael P. Rice 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)