L01000012345

1359 Lake Francis Drive Apopka, FL 32712 (407) 889-4333 (407) 222-3185 Cell paj_3@att.net

July 12, 2001

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399 OI JUL 26 PM 2: 46
SECRETARY OF STATE
PALLAHASSEE FLORIDA

RE: Cover Letter for LLC

Registration of P.A. Johnston LLC

900004474719----07/13/01--01075--002 ****125.00 ****125.00

To Whom It May Concern:

In an effort to be compliant with the requisites outlined by the Department of State Division of Corporations, I have enclosed the following information for your office:

Name:

Paul A. Johnston

Daytime Telephone Number:

(407) 222-3185 or (407) 889-4333

Enclosed please find my check in the amount of \$ 125.00 for the filing fee and the designation of the Registered Agent.

Thank you.

Paul A. Johnston

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 17, 2001

PAUL A JOHNSTON 1359 LAKE FRANCIS DRIVE APOPKA, FL 32712

SUBJECT: P.A. JOHNSTON LLC Ref. Number: W01000016400

We have received your document for P.A. JOHNSTON 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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 901A00041830

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
P. A. Johnston LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 1359 Lake Francis Drive Apopka, FL 32712-2119	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature	
The name and the Florida street address of the registered agent are: Paul A. Johnston Paul A. Johnston Name 1359 Lake Francis Drive Florida street address (P.O. Box NOT acceptable) Apoplea FL 32712-2119 City, State, and Zip	Î
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	Į.
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)	

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 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)