



L010000015067

Mullins & Denike P.A.

ERNEST J. MULLINS* FRANK R. DENIKE
ATTORNEYS AT LAW

May 30th 2001

Secretary of State
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL. 32399

100004337601--0
-06/01/01--01041--019
****125.00 ****125.00

Dear Sir/Madam:

re: Shartrice Ventures, LLC

Please find enclosed Articles of Organization for Florida Limited Liability Company, duplicate, together with check in the sum of \$125.00.

Please acknowledge safe receipt.

Yours sincerely

Ernest J. Mullins, Esq.
Attorney at Law

Encs.

EJM/sb

FILED
01 SEP -4 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L01-15067
enc



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 5, 2001

ERNEST MULLINS
519 W. PATRICK STREET
KISSIMMEE, FL 34741

SUBJECT: SHARTRICE VENTURES, LLC
Ref. Number: W01000012737

We have received your document for SHARTRICE VENTURES, 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: 801A00034169

01 SEP -4 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SHARTRICE VENTURES, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

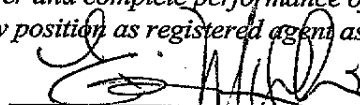
519 W. Patrick Street
Kissimmee, FL 34741

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Ernest J. Mullins
Name
519 W. Patrick Street
Florida street address (P.O. Box NOT acceptable)
Kissimmee, FL 34741
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.)

Ernest J. Mullins

Typed or printed name of signer

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)

01 SEP - 4 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED