

Division of Corporations

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Florida Department of State
Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 205 -0383

From:

Account Name : FREEBORN & FREEBORN, P.A.
Account Number : 075142002301
Phone : (727) 733 -1900
Fax Number : (727) 733 -6362

LIMITED LIABILITY COMPANY

Elephante & Associates, L.L. C.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION
OF
ELEPHANTE & ASSOCIATES, L.L.C.**

ARTICLE I

Name

The name of the limited liability company ("Company") is ELEPHANTE & ASSOCIATES, L.L.C.

ARTICLE II

Address

The mailing and street address of the Company's principal office is: 2865 Gloria Court, Clearwater, Florida 33761.

ARTICLE III

Duration

The period of duration for the Company is perpetual, beginning on the date that these Articles of Organization are filed by the Florida Department of State.

ARTICLE IV

Registered Agent and Office

The name of the Company's initial registered agent in Florida is Alison K. Freeborn. The address of the Company's registered office in Florida is 360 Monroe Street, Dunedin, Florida 34698.

ARTICLE V

Management

The Company is to be managed by two (2) managers. The initial managers will serve until the first annual meeting of the members or until the managers' successors are elected and qualified. The initial managers are identified as: John F. Leckwart, whose address is 2865 Gloria Court, Clearwater, Florida 33761; and Mary M. Leckwart, whose address is 2865 Gloria Court, Clearwater, Florida 33761.

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ARTICLE VI

Admission of Additional or New Members

Members of the Company have the right to admit new members. Additional or new members may be admitted only on the unanimous written consent of the existing member or members, and the existing member or members shall determine the amount and nature of contributions to be made by the additional or new members at the time those new members are admitted.

ARTICLE VII

Continuance of Business

The remaining member or members of the Company have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Company. The business may be continued only on the unanimous written consent of the remaining member or members.

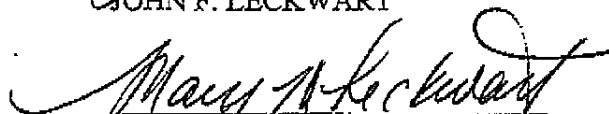
ARTICLE VIII

Additional Provisions

The power to adopt, alter, amend or repeal the regulations of the Company is vested entirely in the managers listed in Article V.

30th IN WITNESS WHEREOF, we have executed these Articles of Organization on this day of October, 2001, at Dunedin, Florida.


JOHN F. LECKWART


MARY M. LECKWART


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STATE OF FLORIDA
COUNTY OF PINELLAS

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State of Florida and County of Pinellas to take acknowledgments, personally appeared JOHN F. LECKWART and MARY M. LECKWART, both personally known to me to be the persons described in and who executed the foregoing Articles of Organization, ~~(or who each identified themselves by _____)~~ and who took an oath.

WITNESS MY HAND and official seal in the County and State aforesaid, this 30th day of October, 2001.



Notary Public
My Commission Expires:



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TALLAHASSEE, FLORIDA

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**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTION
OF
ELEPHANTE & ASSOCIATES, L.L.C.**

The undersigned member of ELEPHANTE & ASSOCIATES, L.L.C. deposes and says:

1. The above named limited liability company has at least one member.
2. The total amount of cash contributed by the member is \$500.00.
3. The agreed value of property other than cash contributed by the member is \$ -0-. A description of the property is attached and made a part of this Affidavit.
4. The total amount of cash or property anticipated to be contributed by me as member is \$ 500.00. This total includes amounts from (2) and (3) above.

In accordance with Section 608.408(3), Florida Statutes, the execution of this Affidavit constitutes an affirmation under penalties of perjury that the facts herein stated are true.

Dated this 30th day of October, 2001

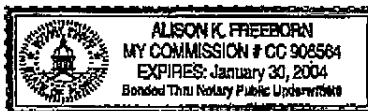
John F. Leckwart
JOHN F. LECKWART

STATE OF FLORIDA
COUNTY OF PINELLAS

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State of Florida and County of Pinellas to take acknowledgments, personally appeared JOHN F. LECKWART, personally known to me to be the person described in and who executed the foregoing Articles of Organization, (~~or who identified himself by~~) and who took an oath.

WITNESS MY HAND and official seal in the County and State aforesaid, this 30th day of October, 2001.

A. K. L.
Notary Public
My Commission Expires:



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TALLAHASSEE, FLORIDA
01 OCT 31

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTION
OF
ELEPHANTE & ASSOCIATES, L.L.C.**

The undersigned member of ELEPHANTE & ASSOCIATES, L.L.C. deposes and says:

1. The above named limited liability company has at least one member.
2. The total amount of cash contributed by the member is \$500.00.
3. The agreed value of property other than cash contributed by the member is \$ -0-. A description of the property is attached and made a part of this Affidavit.
5. The total amount of cash or property anticipated to be contributed by me as member is \$500.00. This total includes amounts from (2) and (3) above.

In accordance with Section 608.408(3), Florida Statutes, the execution of this Affidavit constitutes an affirmation under penalties of perjury that the facts herein stated are true.

Dated this 30th day of October, 2001



MARY M. LECKWART

STATE OF FLORIDA
COUNTY OF PINELLAS

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State of Florida and County of Pinellas to take acknowledgments, personally appeared MARY M. LECKWART, personally known to me to be the person described in and who executed the foregoing Articles of Organization, ~~(or who identified herself by~~ and who took an oath.

WITNESS MY HAND and official seal in the County and State aforesaid, this 30th day of October, 2001.




Notary Public
My Commission Expires:

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**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
AND REGISTERED OFFICE
OF ELEPHANTE & ASSOCIATES, L.L.C.**

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TALLAHASSEE, FLORIDA
OCT 31

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered office/registered agent in the State of Florida:

1. The name of the limited liability company is ELEPHANTE & ASSOCIATES, L.L.C.

2. The name and address of the registered agent and office is ALISON K. FREEBORN, 360 Monroe Street, Dunedin, Florida 34698.

Having been named as registered agent and to accept service of process for the above named 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.

Dated: 10/30/01

ALISON K. FREEBORN

STATE OF FLORIDA
COUNTY OF PINELLAS

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State of Florida and County of Pinellas to take acknowledgments, personally appeared ALISON K. FREEBORN, personally known to me to be the person described in and who executed the foregoing Certificate and Designation of Registered Agent and Registered Office, (or who identified herself by N/A), and who took an oath.

WITNESS MY HAND and official seal in the County and State aforesaid, this 30th day of October, 2001.



Sallie E. Skinner
My Commission CC728697
Expires March 29, 2002

Sallie E. Skinner
Notary Public
My Commission Expires:

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