## (10(000)-1293 Transmittal Letter

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To: Registration Section

Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

(850) 245-6051

Re: Benjamin Gainer, L.L.C.

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MJH

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\*\*\*\*125.00 \*\*\*\*125.00

Enclosed is an original and <u>1</u> copies of articles of organization for the above referenced LLC along with a check for <u>\$ 125.00</u> as follows: <u>\$100.00</u> for filing fee

\$25.00 for Designation of Registered Agent

Please send acknowledgement of receipt and/or date-stamped copy to:

Benjamin D. Gainer Benjamin Gainer, L.L.C. 1214 East Lambright St. Tampa, FL 33605 (727) 243-3702 Daytime Phone

OI DEC -5 AMII: 03
SECRETARY OF STATE

## ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
BENJAMIN GAINER, L.L.C.	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company 1214 East LAMBRIGHT ST., TAMPA, FL 33605	ny is:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:	
The name and the Florida street address of the registered agent are:	
BENJAMIN D. GAINER Name	
1214 EAST LAMBRIGHT ST. Florida street address (P.O. Box NOT acceptable)	
TAMPA, FL FL 33605 City, State, and Zip	. ÷
Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment a registered agent and agree to act in this capacity. I further agree to comply with the provision statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.  Pengann D. Plens Registered Agent's Signature	ns of all and
Article IV - Management (Check box if applicable.)  The Limited Liability Company is to be managed by one manager or more managers at 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	OI DEC -5 AM II: 03
that the facts stated herein are true.)	<b>&gt;</b>

Filing Fees:

Typed or printed name of signee

\$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)

Member:

Address: