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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-24-03

TO: REgistration Section, DIV. of Corporations.

FROM: Cory Liffing

Subject: Cover Letter, LLC

Cory Liffing 9210 Highland Ridge Way TAMPA, F1 33647 Phone: 813-994-7408

Cory Liffig

JAN 27 AM & 3 CRETARY OF STATE LLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Cory LiFFRig, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: 9210 Hishland Ridge Way TAMPA, Fl 33647 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Leslie Burke Name 9210 Highland Ridge Way Florida street address (P.O. Box NOT acceptable) TAMPA, FL 33647 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; §S. Registered Agent's Signature (An additional article must be added if an effective date is requested) Signature of a mamber or infauthorized 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)