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Cover Letter

From: Greg Lambert

565 Sacre Coeur Dr.

Melbourne, Fl. 32935

(321) - 480 - 9536

For: L3 Development, L.L.C

565 Sacre Coeur Dr.

Melbourne, Fl. 32935

(321) - 480 - 9536





FLORIDA DEPARTMENT OF STATE Ken Detzner Secretary of State

February 6, 2003

GREG LAMBERT 565 SACRE COEUR DR MELBOURNE, FL 32935

SUBJECT: L3 DEVELOPMENT Ref. Number: W03000003509

03 FEB 13 AH 8: 06

We have received your document for L3 DEVELOPMENT 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.

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 003A00007844

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
L3 Deprelopment LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
565 SACRE COEUR Dr. Melbourne, FL. 32935
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Greg Lambert Name
565 SACYC COCURD, Wells, FL. 33535 Florida street address (P.O. Box NOT acceptable)
Melbourne FL, 32935 = 17 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 mr position as registered agent as provided for in Chapter 608, F.S. Registered Agent's Signature (An additional article must be added if an effective date is requested) 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)