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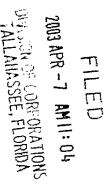
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# TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: HIGHGATE L	TD	
		Name of Limited Liability Company)	
The en	closed Articles of Organization and fee(s)	are submitted for filing.	
Please	return all correspondence concerning this r	matter to the following:	
	DOO HA PARK		2003 APR -7 AT LORIDA
	(Name of Person)		
	HIGHGATE LTD.		SSEE, F.
<del></del>	(Firm/Company)	······································	LOAN THE
	319 WEST REDSOX PATH	4 —	D P S
-	(Address)	<u> </u>	· ·
	HERNANDO, F	FL. 34442	
	(City/State and Zip Code)		_
For furt	her information concerning this matter, ple	ease call:	
	Doo Ha Park	at ( 352 -) 527-2008	, ఆ ,
	(Name of Person)	(Area Code & Daytime Telephone Num	nber)
Registra Division 409 E. C	T ADDRESS:  ation Section  of Corporations  Gaines Street  see, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	 

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:

HIGHGATE LTD. CO.

### ARTICLE II - Address:

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

319 West Redsox Path Hernando, FL.34442

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

Doo Ha Park
Name
319 West_Redsox Path
Florida street address (P.O. Box NOT acceptable)
Hernando FL 34442
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

(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.)

yped 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)