

L03000018776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

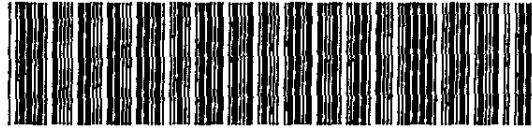
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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05/09/03--01028--004 **100.00

05/28/03--01052--024 **25.00

Money

FILED
MAY 23 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mowrey & Biggins, P.A.
Attorneys at Law

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Donna S. Biggins
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515 North Adams Street
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Crawfordville Office
12 Arran Road
Courthouse Square
Crawfordville, Florida 32327
Telephone: (850) 926-7666
Facsimile: (850) 926-9447

May 8, 2003

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: Articles of Organization for Florida Limited Liability Company

To Whom It May Concern:

Enclosed please find an Article of Organization for Florida Limited Liability Company to be filed on behalf of Large Latitude, LLC along with a check for the appropriate filing fee. If you should have any questions or concerns regarding this matter, please do not hesitate to contact me.

Very truly yours,



Meredith L. Scott
Assistant to Marybeth Watts

:mls
Enclosures

FILED
03 MAY 23 AM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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May 20, 2003

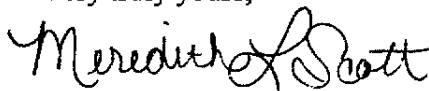
Registration Section
Division of Corporations
Attention: Diane Cushing
Post Office Box 6327
Tallahassee, Florida 32314

Re: Large Latitude, LLC
Reference Number W03000013674

Dear Ms. Cushing:

Enclosed please a check in the amount of \$25.00 for the registered agent designation fee as well as a copy of your most recent correspondence. If you should have any questions or concerns, please do not hesitate to contact me.

Very truly yours,



Meredith L. Scott
Assistant to Marybeth Watts

:mls
Enclosures



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 13, 2003

MEREDITH L. SCOTT
MOWREY & BIGGINS, P.A.
515 NORTH ADAMS STREET
TALLAHASSEE, FL 32301-1111

SUBJECT: LARGE LATITUDE, LLC
Ref. Number: W03000013674

We have received your document for LARGE LATITUDE, LLC and check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$25.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

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) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 703A00029397

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
Large Latitude, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
1570 Applewood Way, Tallahassee, Florida 32312

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

The name and the Florida street address of the registered agent are:

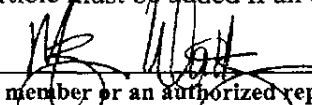
Mary E. Watts
Name
515 North Adams Street
Florida street address (P.O. Box **NOT** acceptable)
Tallahassee, FL 32301
City, State, and Zip

FILED
03 MAY 23 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.)

Mary E. Watts
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)