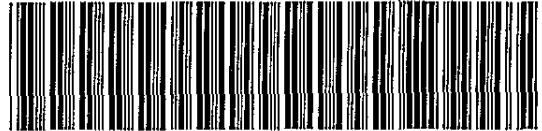


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03 JUN 19 AM 10:49

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA



000020680620

06/19/03--01052--009 \*\*125.00

(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:

AL

Office Use Only

HUFFMAN AND ASSOCIATES LLC

June 13, 2003

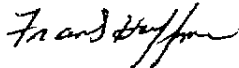
Registrations Dept  
Fl. Div. of Corporations  
PO Box 6327  
Tallahassee, Fl 32314-7060  
United States of America

Dear Registrations Dept:

REGISTRATION OF LLC

Please find enclosed a check from Peacemakers International in the amount of \$125.00. It is our desire to file the enclosed Articles of Organization. Thanks for your early response.

Sincerely,



Frank Huffman  
Marketing Director  
Huffman and Associates LLC

Enclosure (1)

FH/fh  
cc: Jeannie Huffman

FILED

03 JUN 19 AM 10:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

FILED

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Huffman and Associates LLC

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II - Address:**

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

505 NE 22nd Ave #45, Ocala, FL 34470

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

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

Frank Huffman

Name

505 NE 22nd Ave #45

Florida street address (P.O. Box **NOT** acceptable)

Ocala,

FL 34470

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.)

Frank Huffman

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)