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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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MAIL

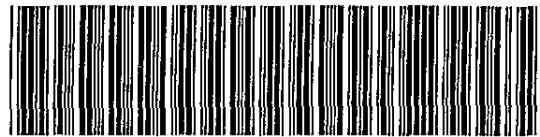
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN JUL 22 2003

Cover Letter

To Whom It May Concern:

Attached is the information needed to obtain a registered LLC.
If you have any questions please call.

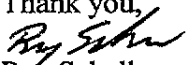
Contact Information:

Name: Ray Schalk

Address: 827 Maxwell Street
Orlando, FL 32804

Phone: 407.425.4583
407.383.0759

Thank you,


Ray Schalk

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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Real Estate Marketing Solutions, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ray Schalk

(Name of Person)

Real Estate Marketing Solutions, LLC

(Firm/Company)

827 Maxwell St.

(Address)

Orlando, Fl., 32804

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Ray Schalk

(Name of Person)

at (407) 425 4583

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Real Estate Marketing Solutions, LLC

ARTICLE II - Address:

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

Principal Office Address:

827 Maxwell Street

Orlando, FL 32804

Mailing Address:

827 Maxwell Street

Orlando, FL 32804

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

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

Ray Schalk

Name

827 Maxwell Street

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

Orlando

FL 32804

City, State, and Zip

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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

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Ray Schalk

827 Maxwell Street

Orlando, FL 32804

MGRM

Gerard S. Krehl

1384 Black Willow Trail

Altamonte Springs, FL 32714

(Use attachment if necessary)

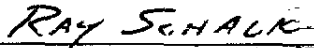
NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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.)



Typed or printed name of signee

CK# 2388
\$160.00

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)

\$160.00

Page 2 of 2

* SEE ATTACHMENT A

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ATTACHMENT A

Article V – Effective Date

The effective date for the beginning of this limited liability company is July 17, 2003.

Article VI – New Members

There shall be no new managers or managing members or members added to this limited liability company without the consent of all existing managers, managing members or members.

REQUIRED SIGNATURE:


RAY SCHALK

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