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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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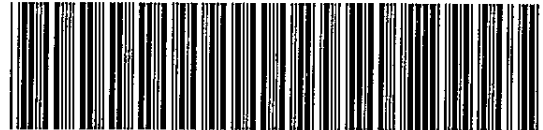
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2003 SEP 18 AM 8:42
CLERK OF SUPERIOR COURT
ALACHUA COUNTY, FLORIDA

J. BRYAN SEP 23 2003

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cotton Capers of Florida, 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:

Henry L. Hollinghead
(Name of Person)

Cotton Capers of Florida, LLC
(Firm/Company)

1302 Dauphin Street
(Address)

Mobile, AL 36604
(City/State and Zip Code)

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2008 SEP 18 AM 8:42
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

D. Darrell Anthony, CPA at (251) 438-5009
(Name of Person) (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:

Cotton Capers of Florida, LLC

ARTICLE II - Address:

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

Principal Office Address:

Cotton Capers of Florida, LLC

174 Azalea Drive

Destin, FL 32541

Mailing Address:

Cotton Capers of Florida, LLC

1302 Dauphin Street

Mobile, AL 36604

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

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

Martha McDonald

Name

174 Azalea Drive

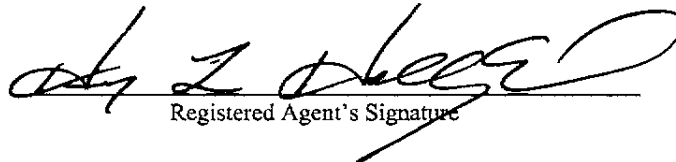
Florida street address (P.O. Box **NOT** acceptable)

Destin, FL 32541

FL

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

(CONTINUED)

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2009 SEP 18 AM 8:42
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TALLAHASSEE, FLORIDA

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

Renee B. Hollinghead

174 Azalea Drive

Destin, FL 32541

Henry L. Hollinghead, Member

174 Azalea Dr., Destin, FL 32541

MGR

Martha McDonald

174 Azalea Drive

Destin, FL 32541

(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.)

Henry L. Hollinghead, Member

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)

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BUREAU OF CORPORATIONS
TALLAHASSEE, FLORIDA