

LO3000040441

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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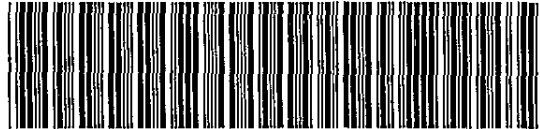
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 OCT 13 PM 1:50

EFFECTIVE DATE

10/20/03

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELSE GROUP 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:

BARBARA ELSE
(Name of Person)

ELSE GROUP
(Firm/Company)

618 SOUTH LAKESHORE BLVD.
(Address)

LAKE WALES FLORIDA 33853
(City/State and Zip Code)

For further information concerning this matter, please call:

FRED ELSE at (863) 676 5317
(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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
ELSE GROUP LLC

ARTICLE II - Address:

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

Principal Office Address:

ELSE GROUP
618 SOUTH LAKESHORE BLVD.
LAKE WALES FLORIDA 33853

Mailing Address:

ELSE GROUP
618 SOUTH LAKESHORE BLVD.
LAKE WALES FLORIDA 33853

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

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

FRED ELSE

Name


618 SOUTH LAKESHORE BLVD.

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

LAKE WALES FL 33853

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)

EFFECTIVE DATE

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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:

MGR

BARBARA ELSE

618 SOUTH LAKESHORE BLVD.

LAKE WALES FLORIDA 33853

MGRM

FRED ELSE


618 SOUTH LAKESHORE BLVD.

LAKE WALES FLORIDA 33853

(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.)

Fred Else

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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DIVISION OF CORPORATIONS

EFFECTIVE DATE

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ADDITIONAL ARTICLE

AN EFFECTIVE DATE FOR THIS ELSE GROUP LLC IS REQUESTED TO BE
20 OCTOBER 2003.

A handwritten signature in black ink, appearing to be "W. Ke" or similar, written in a cursive style.

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10/20/03