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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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MAIL

(Business Entity Name)

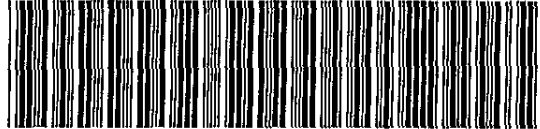
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Via Express: 850-245-6051

October 14, 2003

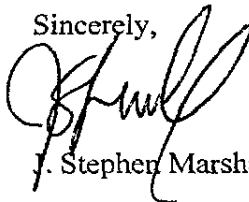
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

To Registration Representative:

On October 3, I mistakenly submitted a "Partnership Registration Statement" (see enclosed) for the formation of a Limited Liability Company.

Attached please find the completed correct forms along with a check for the filing fees.  
Thank you and please contact me at 813-281-8767 with any questions.

Sincerely,



J. Stephen Marshall

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SUBJECT:** 54 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:

J.Stephen Marshall

(Name of Person)

(Firm/Company)

1408 N. Westshore Blvd. #910

(Address)

Tampa,Florida 33607

(City/State and Zip Code)

For further information concerning this matter, please call:

J.Stephen Marshall

(Name of Person)

at ( 813 ) 2818767

(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**

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**ARTICLE I - Name:**

The name of the Limited Liability Company is:

54 LLC

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II - Address:**

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

**Principal Office Address:**

1408 N. Westshore #910

Tampa, Florida 33607

**Mailing Address:**

1408 N. Westshore Blvd. #910

Tampa, Florida 33607

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

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

J. Stephen Marshall

Name

1408 N. Westshore Blvd. #910

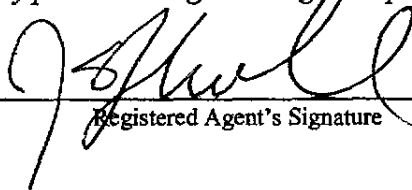
Florida street address (P.O. Box **NOT** acceptable)

Tampa, Florida 33607

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)

**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

J. Stephen Marshall

1408 N. Westshore Blvd. #910

Tampa, Florida 33607

MGR

Robert B. Alston

P.O. Box 1227

Lutz, Florida 33548

MGR

John E. Kutchmire

1713 W. Cypress St.

Tampa, Florida 33606

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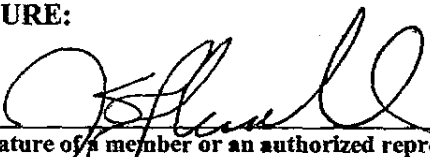
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TALLAHASSEE, FLORIDA

(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.)

J. STEPHEN MARSHALL

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)**