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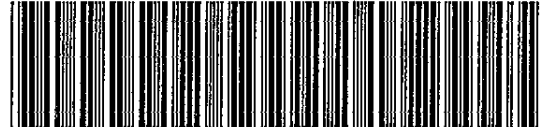
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W03-30201



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 NOV 24 PM 12:54

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10-13/03--01062--004 **155.00

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rob & Tricia Sowell Ministries, 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:

Rob Sowell
(Name of Person)

Rob & Tricia Sowell Ministries, LLC
(Firm/Company)

PO Box 4145
(Address)

Plant City, FL 33563
(City/State and Zip Code)

For further information concerning this matter, please call:

Rob Sowell at (813) -719-2909
(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 17, 2003

ROB SOWELL
PO BOX 4145
PLANT CITY, FL 33563

SUBJECT: ROB & TRICIA SOWELL MINISTRIES, LLC
Ref. Number: W03000030201

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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We have received your document for ROB & TRICIA SOWELL MINISTRIES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 403A00056792

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Rob & Tricia Sowell Ministries, LLC

ARTICLE II - Address:

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

Principal Office Address:

2903 Sutton Pines Ct.

Plant City, FL 33566

Mailing Address:

PO Box 4145

Plant City, FL 33563

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

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

Rob Sowell

Name

2903 Sutton Pines Ct.

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

Plant City, FL 33566

FL

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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)

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

"MGRM" = Managing Member

Plant City, FL 33563

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