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TO: Dept. of State - Division of Corporations

FROM: Richard Moore

DATE: 11/17/03

SUBJECT: Initial Registration of LLC

Enclosed please find the transmittal letter, Articles of Organization, and check in the amount of \$160 made payable to Florida Dept. of State. The check amount should cover Filing Fee for Articles of Organization (\$100), Designation of Registered Agent (\$25), Certified Copy (\$30), and Certificate of Status (\$5). Please feel free to contact me should you have any questions.

Richard Moore

706 Turnbull Ave Ste 103

Altamonte Springs, FL 32701

407-331-1372

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Six Wild Fires, LLC (Name of Limited Liability Company)	<u>—</u>		
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Richard Moore (Name of Person)			
(Name of Person)	_ 		
Stephenson + Moore, Inc.	SECT	03 \	
TO6 Tulabull Ave Ste 103 (Address)	HASSE	03 NOV 20	
(Address)	E C	:0 H:0:	
Altamonte Springs Fr. 32701 (City/State and Zip Code)	ÜRIDA	0: I 7	C
For further information concerning this matter, please call:			
Richard Moore at 407 33/- 1372 (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:	
Six Wild Fires, LLC	
ARTICLE II - Address: The mailing address and street address of the principal	l office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
706 Turnbull Ave. Ste 103	706 Turnbull Ave. Stc 103
Altamonte Springs, Fl. 32701	Altamonte Springs, FL. 32701
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register Richard Moore Name	red agent are: AHASSE
706 Turnbull Ave. Ste Florida street address (P.O. Box 1	103 E D
Altamonte Solings F City, State, and Zip	LORIDA 3270

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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

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

Title: "MGR" =	Name and Address: Manager	
"MGRM"	= Managing Member	
MGRM	Carolyn Moore 706 Furnbull Ave Ste 163 Altamonte Springs Fr. 32701	
_MGRM	Richard Moore 706 Turpbull Ave. Stc 103 Altamonte Springs, R. 32701	
MGRN	Sara McKee 1341 Lyonshire Orive Wesley Chapel, R 33543 ====	0
MGRM	Alex Moore GIS INV Chase LA Norcross, GA 30092	03 NOV 20
(Use attac	hment if necessary)	0 AM 10: 17
NOTE: A	An additional article must be added if an effective date is requested.	7
	ED SIGNATURE:	
	Richard Moon	
	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.)	

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)

Typed or printed name of signee