

L03000051399

Florida Department of State
Division of Corporations
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To:
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Fax Number : (850)205-0383

EFFECTIVE DATE

1-1-04

From:
Account Name : COURT ACCESS CENTERS OF AMERICA
Account Number : 075350000541
Phone : (813)875-1333
Fax Number : (813)875-2703

LIMITED LIABILITY COMPANY

Carmen's Specialties, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

DIVISION OF CORPORATION

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12-10-03

Audit # H03000332584
**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I

Name and Address

The name of this Limited Liability Company is:

Carmen's Specialties, LLC

EFFECTIVE DATE

1-1-04

The mailing address and street address of the Limited Liability Company are :

**16649 Bosley Dr.
Spring Hill, FL 34610**

ARTICLE II

Term of Existence

This Limited Liability Company shall have perpetual existence, commencing upon January 1, 2004.

ARTICLE III

Purpose and Powers

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

ARTICLE IV

Powers

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

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This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 3249 W Cypress St., Suite C, Tampa, FL 33607, (813)-875-1333.

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ARTICLE V
Initial Registered Office and Agent

The street address of the initial registered office of this Limited Liability Company is:

**16649 Bosley Dr.
Spring Hill, FL 34610**

and the name of its registered agent at such address is:

Norman E. Martinson

ARTICLE VI
Effective Date

The effective date for this Limited Liability Company shall be January 1, 2004.

ARTICLE VII
Management

This Limited Liability Company shall have Three manager(s), and is therefore, a manager-managed Company. The name and address of the manager(s) are:

Name and Address

**Norman E. Martinson
16649 Bosley Dr.
Spring Hill, FL 34610**

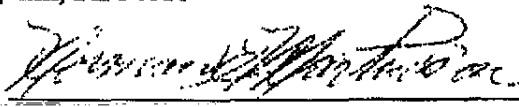
**Cole N. Martinson
13102 Barney Dr.
Hudson, FL 34669**

**Carmen Martinson
16649 Bosley Dr.
Spring Hill, FL 34610**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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Dated: Tuesday, December 09, 2003

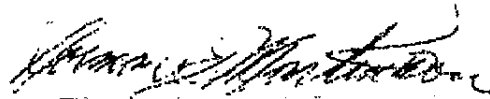

Norman E. Martinson

Audit # H03000332584

ACCEPTANCE BY REGISTERED AGENT

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.

Date: December 9, 2003



Norman E. Martinson

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