## 203000051589

| (Re                                     | questor's Name)  |             |
|---|------------------|-------------|
|   |                  |             |
| (Address)                               |                  |             |
| (Ad                                     | dress)           | <del></del> |
| (City                                   | y/State/Zip/Phon | e #)        |
| PICK-UP                                 | WAIT             | MAIL        |
| (Business Entity Name)                  |                  |             |
| (Document Number)                       |                  |             |
| Certified Copies                        | _ Certificates   | s of Status |
| Special Instructions to Filing Officer: |                  |             |
|   |                  |             |
|   |                  |             |
|   |                  |             |
|   |                  |             |

Office Use Only



100025062271

12/03/03--01042--013 \*\*125.00

M 12/10

PILED SECRETARY OF STATE DIVISION OF CORPORATIONS



November 26, 2003

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

SUBJECT: THOMAS ADAMS, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing:

Please return all correspondence concerning this matter to the following:

THOMAS ADAMS THOMAS ADAMS, LLC P.O. BOX 660512 CHULUOTA, FL 32766-0512

For further information concerning this matter call

THOMAS ADAMS 407-353-1386

DIVISION OF CORPORATIONS
OF CORPORATIONS
OF CORPORATIONS

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME:

The name of the Limited Liability Company is:

THOMAS ADAMS, LLC

ARTICLE II - ADDRESS:

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

Principal Office Address:

Mailing Address

2036 LAKEVIEW AVENUE CHULUOTA, FL 32766 P.O. BOX 660512 CHULUOTA, FL 32766-0512

ARTICLE III - Registered agent, Registered Office, \$ Registered Agent's Signature: The name and the Florida street address of the registered agent are:

THOMAS ADAMS 2036 LAKEVIEW AVENUE CHULUOTA, FL 32766 DIVISION OF CORPORATION

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 Status.

Thomas Adam Signature

## ARTICLE IV - MANAGER

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

TITLE

NAME and ADDRESS

MGR

THOMAS ADAMS P.O. BOX 660512

CHULUOTA, FL 32766-0512

Signature

(In accordance with section 608.408.(3), Florida Statue, the execution of this document constitutes an affirmation under penalties of perjury that the facts state herein are true.

THOMAS ADAMS

03 DEC -- 3 PM 3: 06