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(Requestor's Name) (Address) (Address)	UDUO7268 900025705899			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)	01/20/04 -01002003 **125.00			
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: <u>TAL SEARCH GROup LLE</u> (Name of Limited Liability Company)	FILED
The enclosed Articles of Organization and fee(s) are submitted for filing.	ጅ ። ርጉ
Please return all correspondence concerning this matter to the following:	10
Eller McFarlain (Name of Person)	, * <u>*</u> , * , -***
(Name of Person)	
Tel Seatch Greep LLC	· · · · · · · · · · · · · · · · · · ·
((Firm/Company)	
2003 Alban Are.	
(Address)	
Tillahossee (Floride 32301 (City/State and Zip Code)	en e

For further information concerning this matter, please call:

McFada in (Name of Person) at (<u>850</u>) <u>224-8088</u> (Area Code & Daytime Telephone Number) Ellen

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 1.725 - L

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71 and the second s 2 Dear Sir, SEARCH GROUP LLC Please accept TAL paper with The falls oming hes . . . Eller McFarlain Ave. Tillehassee 3230 2003 Alban -PC Phone 566-1023 -4 * * * * 5 P : -Regards ÷ 3 . <u>1</u> . . Eller MCFarlain -Contractional of the state `____ . المعنية الم 4 m + . -2.75 1.1.1.1.1 . . Her. <u>بة مح</u>د <u>...</u> 1 ي ي ي ي ي ي م ------`... 1. - 13 - 1 - 12 - 12 - 21 - 12 - 21 - 12 * _ . م م م^ی بر مر . 글 문

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:

GROUP LLC

ARTICLE II - Address:

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

	tice Address:	· · _ ·		V
2003 A.	Iban Ave	<u> </u>		_
Tell-h-	1		a anna an	
	3230/		t	
	· · · · · · · · · · · · · · · · · · ·	· .		

Mailing Address:

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<u></u>							_

20.

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

ex MGarlain Name

Florida street address (P.O. Box <u>NOT</u> acceptable)

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, 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:

Name and Address:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member

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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

ELLEN MCFARLAIN

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.)

Ellen Mc Facla cin 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)