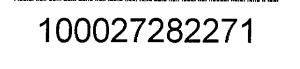
104000008218

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
1/23 PL 1C			

Office Use Only



01/26/04--01022--014 **125.00

HUM

04 JM 23 PM 1: 38

TRANSMITTAL LETTER

	Registration Section Division of Corporations			
SUBJEC	T: UBTC, LLC			_
	(Name of	Limited Liability Con	npany)	
The enclo	osed Articles of Organization and fee(s) are submitted for fil	ling.	
	Please return all corres	pondence concerning	this matter to the following:	
	Roger W. Lusby, Jr.			
	 -	(Name of Person)		
	UBTC,LLC		<u> </u>	
		(Firm/Company)		_
65	535 Valen Way #202			
		(Address)		
	Naples, FL 34108			
		(City/State and Zip Co	ode)	
For further	er information concerning this matter,	please call:		
Roger W	/. Lusby, Jr.	at (_239		_
	(Name of Person)	(Area Co	de & 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

UBTC,LLC	
ARTICLE II - Address:	
	he principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
6535 Valen Way #202	6535 Valen Way #202
Naples, FL 34108	Naples, FL 34108
	ered Office, & Registered Agent's Signature:
	the registered agent are:
	the registered agent are:
The name and the Florida street address of Roger W. Lusby, Jr.	the registered agent are:
The name and the Florida street address of Roger W. Lusby, Jr.	the registered agent are:
The name and the Florida street address of Roger W. Lusby, Jr. N 6535 Valen Way #202	the registered agent are:

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" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Roger W. Lusby, Jr.
	6535 Valen Way #202
	Naples, FL 34108
MGRM	Robert W. McMichael
WIGICIAN	21609 Belhaven Way
	Estero, FL 33928
	200
	_
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
	2

REQUIRED SIGNATURE:

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.)

Roger W. Lusby, Jr.

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)