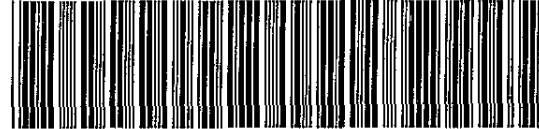


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04 JAN 26 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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01/26/04--01055--007 **125.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04 JAN 26 PM 1:5

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FTB, LLC
7605 SW 51st Blvd.
Gainesville, FL 32608

DATE: January 23, 2004

TO: Registration Section
Division of Corporations

PHONE: 850-245-6051
FAX: 000-000-0000

FROM: Fletcher Bowden
Wellpak, Inc.

PHONE: 352-264-1221
FAX: 352-264-1226
E-MAIL: fletcher@wellpakinc.com

NUMBER OF PAGES INCLUDING COVER SHEET -1-

RE: LLC

Enclosed please find the necessary paperwork for the registration of FTB, LLC.

Please feel free to give me a call at the number listed above if you have any questions.

Fletcher Bowden

TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

04 JAN 26 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: FTB, LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Fletcher T. Bowden
(Name of Person)

FTB, LLC
(Firm/Company)

7605 S. W. 51st Blvd.
(Address)

Gainesville, FL 32608
(City/State and Zip Code)

For further information concerning this matter, please call:

Fletcher T. Bowden at (352) 264-1221
(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**

FILED

04 JAN 26 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

FTB, LLC

ARTICLE II - Address:

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

Principal Office Address:

7605 S.W. 51st Blvd.

Gainesville, FL 332608

Mailing Address:

7605 S.W. 51st Blvd.

Gainesville, FL 32608

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Fletcher T. Bowden

Name

7605 S.W. 51st Blvd.

Florida street address (P.O. Box **NOT** acceptable)

Gainesville, FL 32608

FLORIDA

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..

Fletcher T. Bowden

Registered Agent's Signature

FILED

04 JAN 26 PM 1:51

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

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Fletcher T. Bowden

7605 S.W. 51st Blvd.

Gainesville, FL 32608

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Fletcher T. Bowden

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.)

Fletcher T. Bowden

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)