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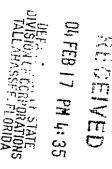
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TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: LAMY Enterpri	SCS LLC" I Liability Company)
The enclosed Articles of Organization and fee(s) are sub	mitted for filing.
Please return all correspondence concerning this matter t	o the following:
LAWrence F BryA. (Name of Person)	<u>1</u>
LARRY Enfergrises	5"LLC"
3213 North Ridge (Address)	RD.
1A/1 F/A, 3230 (City/State and Zip Code)	<u>5</u>
For further information concerning this matter, please cal	
LAWrence F BryAnt an (Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS: M.	AILING ADDRESS:
	gistration Section
Division of Cornerations Div	vicion of Compositions

P.O. Box 6327

Tallahassee, Florida 32314

409 E. Gaines Street

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	
ARTICLE I - Name: The name of the Limited Liability Company is:	
ARTICLE II - Address:	
The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
3213 North Ridge RD 3213 North Ridge RD	
7A11 FLA, 32305 TAII, FLA 32305	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:	

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

LAWrence F Bryant TAII, FLA, FL 32305 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, F.S..

Registered Agent's Signature

(CONTINUED)

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

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

<u>Citle:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	LAWRENCE F BryAnt 3213 North Ridge IRD TAIL FIM. 32305

(Use attachment if necessary)

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

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.)

Typed or printed name of signer

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)