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TRANSMITTAL LETTER

Division o	of Corporations
SUBJECT:	JOSEPH M. RANEGAN LLC
	(Name of Limited Liability Company)
The enclosed Artic	les of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following: JOSEPH M. RANEGAN
	(Name of Person)
	JOSEPH M. RANEGAN LLC
	(Firm/Company)
	203 E. HALIFAX AVE
	(Address)
	OAK HILL, FL 32759
_	(City/State and Zip Code)
For further informa	ation concerning this matter, please call:
JOSEPH M. RAN	IEGAN at (386) 345-3144
(1	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

MINISTER SEE	KILL BASS
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The name of the Limited Liability Company is:

JOSEPH M. RANEGAN LLC

ART	$\Gamma \Gamma C \Gamma$.F. I	I _ A	dd	ress:

The mailing address an	d street address of the pri	incipal office of	of the Limited Liability Company is:
Principal Office Addr	ess:	<u>Mail</u>	ing Address:
203 E. HALIFAX AVE		203 E	. HALIFAX AVE
OAK HILL, FL 32759		OAK I	HILL, FL 32759
•	da street address of the re	egistered agen	gistered Agent's Signature: are:
	JOSEPH M. RA	NEGAN	
	Name		
	203 E. HALIFA	X AVE	
	Florida street address (P.O	. Box <u>NOT</u> accep	otable)
	OAK HILL	FLORIDA	32759
	City, State, a	nd 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 Man The name and address of each Manager	aging Member(s): ger or Managing Member is as follows:	<i>س</i> ے
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	THE REPORT OF THE PARTY OF THE
MGRM	JOSEPH M. RANEGAN 203 E. HALIFAX AVE OAK HILL, FL 32759	OMERICA MARIONS TO A STATE OF THE STATE OF T
(Use attachment if necessary)		
NOTE: An additional article must	be added if an effective date is reques	ted.
(In accordance with section of this document constitutes that the facts stated herein ar	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury re true.)	
	r 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)