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ACCOUNT NO. : 072100000032

REFERENCE: 489835

9156A

AUTHORIZATION:

COST LIMIT : \$ 160.00

ORDER DATE: March 11, 2004

ORDER TIME : 12:08 PM

ORDER NO. : 489835-005

CUSTOMER NO:

9156A

CUSTOMER: Larry A. Echols, Esq.

Larry A. Echols, P.a.

6100 Estero Boulevard

Fort Myers Beac, FL 33931

DOMESTIC FILING

NAME:

ROXIE SMITH FAMILY, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION

<u>xx</u>	ARTICLES OF ORGANIZATION
PLEASE	RETURN THE FOLLOWING AS PROOF OF FILING:
XX XX	CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT	PERSON: Susie Knight - EXT. 2956 EXAMINER'S INITIALS:



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Roxie Smith Family, LLC	
ARTICLE II - Address: The mailing address and street address of the princip	pal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
21521 Madera Road	21521 Madera Road
Fort Myers Beach, Florida 33931	Bank Marker Bank Bland
ARTICLE III - Registered Agent, Registered Off	
ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the regist	ice, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Registered Off	ice, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the regist Larry A. Echols	ice, & Registered Agent's Signature: ered agent are:
ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the regist Larry A. Echols Name	ice, & Registered Agent's Signature: ered agent are:
ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the regist Larry A. Echols Name 6100 Estero Bouley	ice, & Registered Agent's Signature: ered agent are: vard NOT acceptable)

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 "MGRM" = Managing Member	Name and Address:	· .	·
MGRM	Roxanna L. Smith 21521 Madera Road Fort Myers Beach,	Florida	33931
The state of the s			
·		<u></u>	·
· <u>***</u> .			· •
(Use attachment if necessary)			
NOTE: An additional article must be	added if an effective date is requ	ested.	
REQUIRED SIGNATURE:			
Signature of a member or an ac	thorized representative of a member.		
(In accordance with section 608, of this document constitutes an a that the facts stated herein are tru	408(3), Florida Statutes, the execution Mirmation under the penalties of perjury te.)		

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)

Typed or printed name of signee