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DIVISION OF CURPCRATION



J. BRYEN HAR 2-9 2001

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HOOVER PROPERTIES (Name of Limited Liab)	ility Company)
The enclosed Articles of Organization and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the f	following:
DONNIE R. HOOVER (Name of Person)	<u> </u>
HOOVER PROPERTIES, LLC (Firm/Company)	
5707 HOOVER CT.	
TAU PL 32311 (City/State and Zip Code)	<u>. </u>
For further information concerning this matter, please call:	
DONNIE HOUVER— at (89)	50 524-9606 ea Code & Daytime Telephone Number)
Registration Section Registrat	NG ADDRESS: tion Section of Corporations

P.O. Box 6327

-- Tallahassee, Florida 32314

409 E. Gaines Street

Tallahassee, Florida 32399

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ANTICLES OF ONGANIZATION FOR PLONIDA LIMITED LIADIENT FORMANT
ARTICLE I - Name: The name of the Limited Liability Company is: HOOVER PROPERTIES LLC ARTICLE II - Address:
HOOVER PROPERTIES, LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
HOOVER PROPERTIES, LLC 5707 HOOVER CT TALL, FL 32311 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are: Donnie 2. Hoover Name
Name 5707 Hoovel CT Florida street address (P.O. Box NOT acceptable) TALL FL 32311 City, State, and Zip
Having been named as registered agent and to accept service of process for the above stated limited

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>Title:</u> "MGR" = Manager	Name and Address:	TASE
"MGRM" = Managing Member		OL MAR 29
mgrm	Donnie R. Hoover 5707 Hoover C+ Tall, FL 32311	PH. FL
MGRM	Steven D. Profitt 1573 Clifford Hill Rd. Tallahassee FL 32308	12: 48 12: 48
MGRN	Annette L. Hoover 5707 Hoover Ct Tall, FL 32311	- -
	<u> </u>	-
		-

(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.)

note K. Hoover

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)