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| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer. Special Instructions to Filing Officer. |
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TRANSMITTAL LETTER

| BJECT: | Horsley investment Group, LLC | | | | | |
|---------------------|-------------------------------|-------------------|------------|---------|-------------------------|--|
| | (Name | of Limited Liab | ility Cor | npany) | | |
| nclosed Articles of | Organization and fe | ee(s) are submitt | ted for fi | ling. | | |
| | Please return all cor | respondence co | ncerning | this ma | atter to the following: | |
| | | Gary | Horsley | | | |
| | | (Name | of Person) |) | | |
| | | | | | | |
| | | (Firm/C | Company) | | | |
| | | 11807 S.\ | N. 48th | Court | | |
| | **** | (Ad | dress) | | | |
| | | Cooper Cit | ly, FL 3 | 3330 | | |
| <u></u> | | (City/State | and Zip C | ode) | | |
| further information | concerning this matt | er, please call: | | | | |
| Emest | W. Horsley | at (| 305 |) | 817-3393 | |
| (Nf | of Person) | | (Area C | ode & D | aytime Telephone Numbe | |

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

| The name of the Limited Liability Company is: | |
|--|--|
| Horsley Investment Group, LLC | <u> </u> |
| ARTICLE II - Address: The mailing address and street address of the pr | incipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 11807 S.W. 48th Court | 11807 S.W. 48th Court |
| Cooper City, FL 33330 | Cooper City, FL 33330 |
| | |
| ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re | |
| Ernest W. i | Horsley Torsley |
| Name | R 22 |
| | |
| 5760 Surrey Ci | , and the second se |
| Florida street address (P.O | rcle East |

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 Signatur

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:

| <u>Title:</u> | Name and Address: |
|-------------------------------|--------------------------|
| "MGR" = Manager | |
| "MGRM" = Managing Member | - |
| | |
| MGRM | Emest W. Horsley |
| • | 5760 Surrey Circle East |
| | Davie, FL 33331 |
| | |
| MGRM | Gary D. Horsley |
| | 11807 S.W. 48th Court |
| | Cooper City, FL 33330 |
| | |
| MGRM | Jason J. Horsley |
| | 9228 N.W. 1st Street |
| | Pembroke Pines, FL 33024 |
| | |
| MGRM | Frank Sobczyk |
| | 861 S.E. 7th Avenue |
| | Pompano Beach, FL 33060 |
| (Use attachment if necessary) | |
| • | |
| | |
| | |
| | |

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

| EQUIRED 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.) |
| Ernest W. Horsley |
| 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)