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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
·		
SUBJECT: SIGN TECHNOLOGIES II, LLC		
(Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
LAWRENCE E. BENNETT		
(Name of Person)		
SIGN TECHNOLOGIES II, LLC		
(Firm/Company)		
·		
3675 SR 580		
(Address)		
OLDSMAR, FL 34677		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
LAWRENCE E. BENNETT at (386) 405-3000		
(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

ARTICLE I - Name:	
The name of the Limited Liability Company is	-
SIGN TECHNOLOGIES II, LLC	
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3675 SR 580	SAME
OLDSMAR, FL 34677	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the	
LAWRENCE E. BENNETT	
Nam	
315 HERBERT ST	- 7 T
Florida street address (P	O. Box NOT acceptable)
PORT ORANGE	FLORIDA 332129
City, State	

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 its 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
Walashig Welloci		
MGRM 55%	LAWRENCE E, BENNETT	
	315 HERBERT ST	
	PORT ORANGE, FL 32129	
MGRM 45%	VINCENT SACCO	
	235 E. 57TH STREET	
	NEW YORK, NEW YORK 10022	
	<u> </u>	
	<u> </u>	
	<u> </u>	
(Use attachment if necessary)		
NOTE: An additional article must be added if an effective date is requested.		
REQUIRED SIGNATURE:		
-lane		
Signature of a member or an authorized representative of a member.		
Signature of a member or at au	thorized representative of a member.	
(In accordance with section 608.4 of this document constitutes an af that the facts stated herein are true	108(3), Florida Statutes, the execution firmation under the penalties of perjury e.)	
LAWRENCE E. BENNETT		

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