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TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations	
SUBJE	ECT: Richard D. McLeland, LLC	
	(Name of Limited Liability Company)	
The end	aclosed Articles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to	the following:
	Richard D. McLeland	
	(Name of Person)	
	Richard D. McLeland, LLC	
	(Firm/Company)	ASS A
_	10 "D" Street	
	(Address)	
	Boynton Beach, Fiorida 33455	=====================================
	(City/State and Zip Code)	
For furt	ther information concerning this matter, please call:	
	Richard D. McLeland at () 665-004	¥1 :
	(Name of Person) (Area Code & Daytime	Telephone Number)
		I

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

	ae:	元 元
The name of the Li	mited Liability Company is:	AR 31
Richard D. McLeland	I, LLC	SEE
ARTICLE II - Ad The mailing addres		oal office of the Limited Liability Company
Principal Office A	ddress:	Mailing Address:
10 "D" Street		10 "D" Street
Boynton Beach, Flori	ida 33455	Boynton Beach, Florida 33455
	Florida street address of the register	
	Florida street address of the register of the Richard D. McLela	tered agent are:
	Florida street address of the register	nd

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:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
	Richard D. McLeland
MGR	Richard D. McLeland
	TAC
	AR 3
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	36 36
(Use attachment if necessary)	
(Ose attacimient it necessary)	
NOTE: An additional article mus	t be added if an effective date is requested.
DEOLIDED CICALTIDE.	
REQUIRED SIGNATURE:	D. McLulan
Signature of a member or	an authorized representative of a member.
(In accordance with section of this document constitutes that the facts stated herein a	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)

<u>Filing Fees:</u> \$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)

Richard D. McLeland Typed or printed name of signee