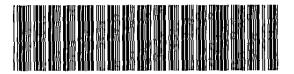
L04000029779

(Requ	iestor's Name)	
(Addr	ess)	
(Addr	ess)	
(Ĉity/:	State/Zip/Phon	e #)
PICK-UP		MAIL
WOL -1070		
(Busi	ness Entity Na	me)
(Docu	ıment Number	
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	
		İ

Office Use Only



700030001907

04/12/04--01076--020 **50.00

di 100701 | G1071--010 | *#75.00

04 MPR 12 PH 4: 05

L04/19/04



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 17, 2004

COUSINS UNITED, LLP 1154 LINCOLN COURT CAPE CORAL, FL 33904

SUBJECT: COUSINS UNITED, LLP Ref. Number: W04000010704

DIVISION OF CORPORATIONS
OF NPR 12 PM 4: 05

We have received your document for COUSINS UNITED, LLP and your check(s) totaling \$75.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted forms for two DIFFERENT types of filing. If you intend to file a limited liability partnership, you should complete and return the enclosed "Statement of Qualification" along with your "Partnership Registration Statement."

If instead you wish to file a Limited Partnership, please return your "Certificate of Limited Partnership" and "Affidavit of Capital Contributions" along with a check for the additional \$1,710 due for your Limited Partnership filing. If you intend to file a Limited Liability Partnership instead, as discussed in the previous paragraph, there is no additional payment due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 804A00017721

TRANSMITTAL LETTER

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: Cousins United, 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:		
1154 Lincoln Court. Cape Coral, FL. 33904	1154 Lincoln Court. Cape Coral, FL. 33904		

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Deborah A	rnold
Name	e
1154 Linco	in Court.
Florida street address (P.	O. Box NOT acceptable)
Cape Coral	_{FL} 33904
City, State,	and Zin

04 APR 12 PM 4: 05

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:		
"MGRM" = Managing Member			
MGR	Deborah Arnold		
	1154 Lincoln Court.		
	Cape Coral, FL. 33904		
	Deborah Arnold		
			
			•
		04 V	EWisi
		04 APR 12	
		2	F CO
(Use attachment if necessary)		PH 4: 05	OF STAT
NOTE: An additional article mu	est be added if an effective date is requested.)5	28.50 E.E.
REQUIRED SIGNATURE:			
Signature of a me	Local Maria 4-8 ember or an authorized representative of a member.	7-04	
of this document of	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ded herein are true.)		
	Deborah Arnold		
	Typed or printed name of signee		
	Filing Foot		

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)