

L04000033464

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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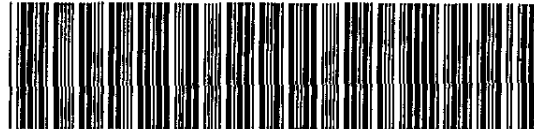
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2004 APR 26 7:34:47
SECRET
TALLAHASSEE, FLORIDA

Law Offices

Michael Wm Mead, P.A.

24 Walter Martin Road, Suite 3
Fort Walton Beach, Florida 32548

Telephone: (850) 243-3135

Facsimile: (850) 244-4849

Michael Wm Mead

Michael Wm Mead, Jr.

Please reply to:

Post Office Drawer 1329

Fort Walton Beach, Florida 32549-1329

April 21, 2004

Corporate Records Bureau
Division of Corporations
Department of State
Post Office Box 6327
Tallahassee, Florida 32314

RE: SCOTT A. NELSON ENTERPRISES, LLC

Gentlemen:

Enclosed please find the original and one copy each of the Articles of Organization for filing regarding the above-referenced matter. Please file and return a certified copy to this office. I enclose a self-addressed, stamped envelope for your convenience.

Also enclosed please find my check in the sum of \$125.00 that represents the following:

Filing fee	\$100.00
Registered agent	<u>25.00</u>
	\$125.00

Thank you for your assistance and cooperation in this matter.

Sincerely,

MICHAEL WM MEAD, P.A.

MICHAEL Wm MEAD
MWM/joy
Enclosures

FILED
APR 26 A 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF
SCOTT A. NELSON ENTERPRISES, LLC

ARTICLE I ~ Name

The name of the limited liability company shall be **SCOTT A. NELSON ENTERPRISES, LLC**.

ARTICLE II ~ Address

The street address of the principal office of the Limited Liability Company shall be 843 Kell-Aire Drive, Destin, FL 32541 (Okaloosa County), but it shall have the power and authority to establish branch offices at such place or places as may be designated by the members.

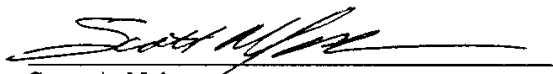
The mailing address for the Limited Liability Company shall be the same

ARTICLE III ~ Registered Agent, Registered Office
& Registered Agent's Signature

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

Scott A. Nelson
843 Kell-Aire Drive
Destin, Florida 32451

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.

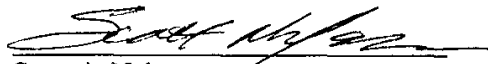


Scott A. Nelson
Registered Agent's Signature

ARTICLE IV ~ Management

* This Limited Liability Company is a member-managed company.


This Limited Liability Company is a manager-managed company.


Scott A. Nelson

2004 APR 26 A 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

In accordance with §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.

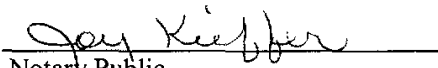

Scott A. Nelson


4-21-04
Date signed

STATE OF FLORIDA
COUNTY OF OKALOOSA

The foregoing instrument was acknowledged before me this ____ day of April, 2004, by Scott A. Nelson, who

 ✓ is personally known to me, or
 produced _____ as identification.


Notary Public
My Commission Expires:

 Joy Keffler
My Commission DD198616
Expires March 31, 2007

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OF
SCOTT A. NELSON ENTERPRISES, LLC

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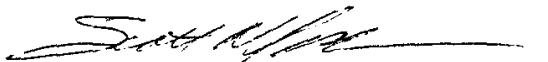
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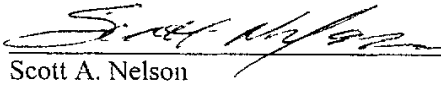


Scott A. Nelson
Registered Agent's Signature

ARTICLE IV ~ Management

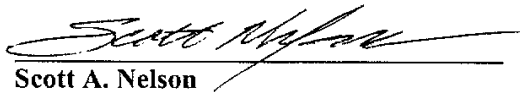
✱ This Limited Liability Company is a member-managed company.

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Scott A. Nelson

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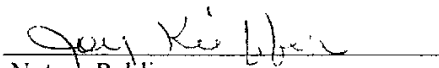

Scott A. Nelson


4-21-04
Date signed

STATE OF FLORIDA
COUNTY OF OKALOOSA

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✓ is personally known to me, or
____ produced _____ as identification.


Notary Public
My Commission Expires:

 Joy Kieffer
My Commission DD198616
Expires March 31, 2007