404000033846

SECRETARY FOREN (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP **□** WAIT MAIL (Business Entity Name) (Document Number) Certified Copies _ Certificates of Status Special Instructions to Filing Officer:

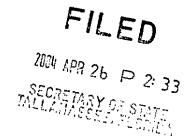
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900030927169



DRIVEN LLC 10707 NW 49th Manor Coral Springs, Florida 33076



APRIL 13, 2004

Florida Dept of State Registration Section **Division of Corporations** Post Office Box 6327 Tallahassee, FL 32351

This letter is to verify that the corporation, Driven LLC is managed by Mr. Troy Drayton & Mr. Reginald Givens of 10707 NW 49th Manor, Coral Springs, FL 33076. Please feel free to contact either Managers at the following (954)575-8469, should you require any further information.

rayton Regund Gruns. Reginald Givens

sm/TD/RG



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

FILED

2004 APR 26 P 2: 33

SECRETARY OF STATE

April 5, 2004

TROY DRAYTON 10707 NW 49TH MANOR CORAL SPRINGS, FL 33076

SUBJECT: DRIVEN CORP. LLC Ref. Number: W04000013156

We have received your document for DRIVEN CORP. LLC and your check(s) totaling \$165.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORP.." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

The registered agent must sign accepting the designation.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 104A00022118

TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations				FILED
SUBJ	ЕСТ:	DRIVEN (Name of Limited Lis		ompany)	2001 17R 26 P 2: 33
The er	nclosed Articles of Organiza	tion and fee(s) are submi	itted for	filing.	SECRETARY OF STATE TALLAMASSEE FLORIDA
	Please ret	um all correspondence c	oncernir	ng this matter to	the following:
	TROY DRAYTON				
		(Name	of Perso	n)	
DRIVEN LLC					
		(Firm	Company	y)	
		10707 NW 4	9TH M	ANOR	
		(A	ddress)		
		CORAL SPR			
		(City/State	and Zip	Code)	
For fu	rther information concerning	g this matter, please call:			
	TROY DRAYTON	at (954	575- 840	59
	(Name of Person)			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

FILED

ARTICLE I - Name:	2004 APR 26 🏳 2: 33		
The name of the Limited Liability Company is:	SECRETARY OF STATE TALLAMASSEE, FLORID		
DRIVEN LLC	TATELANDREE, PLUMIDA		
ARTICLE II - Address: The mailing address and street address of the principal office of	the Limited Liability Company is:		
Principal Office Address: Mailin	Mailing Address:		
10707 NW 49TH MANOR 10707 N	10707 NW 49TH MANOR		
CORAL SPRINGS, FL 33076 CORAL	CORAL SPRINGS, FL 33076		
ARTICLE III - Registered Agent, Registered Office, & Regis	istered Agent's Signature:		
ARTICLE III - Registered Agent, Registered Office, & Registered agent and the Florida street address of the registered agent a			
The name and the Florida street address of the registered agent a			
The name and the Florida street address of the registered agent a TROY DRAYTON Name			
The name and the Florida street address of the registered agent a	are:		
The name and the Florida street address of the registered agent a TROY DRAYTON Name 10707 NW 49TH MANOR Florida street address (P.O. Box NOT accepta	are:		

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.

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managin The name and address of each Manager of		FILED
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	2001 APR 26 P 2: 33
MRG	TROY DRAYTON 10707 NW 49TH MANOR	SECRETARY OF STATE
MRG	CORAL SPRINGS, FL 33076 REGINALD GIVENS	
IVI CO	10707 NW 49TH MANOR CORAL SPRINGS, FL 33076	
(Use attachment if necessary)		
NOTE: An additional article must be a	added if an effective date is requ	ested.
REQUIRED SIGNATURE:		
Signature of a member or an au	thorized representative of a member.	
	108(3), Florida Statutes, the execution firmation under the penalties of perjury e.)	
	RAYTON ited 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)