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PICK-UP	WAIT	MAIL
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: MARINA COVE IN VESTMENTS, L. U.C. (Name of Limited Liability Company)			
The enclosed Articles of Organization and fee(s) are submitted for filling.			
Please return all correspondence concerning this matter to the following:			
JEFFREY C. ELUS (Name of Person)  TO F. TILL K. T. IC. TILL			
JCE THUESTING, INC.			
P.D. BOX 611163			
(Address)			
ROSEMARY BEACH, FL 32461 (City/State and Zip Code)			
(314)-2311-3-12-17			
For further information concerning this matter, please call:			
JEFFREY C. EUS 11 850 , 986-3650			

STREET ADDRESS:

(Name of Person)

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

(Area Code & Daytime Telephone Number)

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR ELORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	ALLE TO A
MARINA COVE INVESTMENTS	5, L.C.
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
	Mailing Address: P. D. BOX 61163
Principal Office Address:  263 MONTGOMER/ STREET  SANTA ROSA BEACH, FL	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

JEFFREI C. ELUS

Name

263 Montromer Street

Florida street address (P.O. Box NOT acceptable)

SANTA ROSA BEACH, FLORIDA 32459
City, State, and Zin

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 Manager The name and address of each Manager	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	JEFFREY C. ELUS P.O. BOX GIII63 ROSEMARY BEACH, FL 32401
MGRM	HEIDI M. ELLIS P.O. BOX (0)1163 ROSEMARI BEACH, FL 32461
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	4
Africa (	C. Elh
Signature of a member or an a	uthorized representative of a member.
	.408(3), Florida Statutes, the execution affirmation under the penalties of perjury ue.)
JEFFREY	C. trus
Typed or pri	inted 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)