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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	· - · · · · · ,			
SUBJECT: TRIFTWOOD ESTATES NVESTME (Name of Limited Liability Company)	ENTS, L.L.C.	-		
The enclosed Articles of Organization and fee(s) are submitted for filing.		· - · · · · · · · · · · · · · · · · · · ·		
Please return all correspondence concerning this matter	to the following:	The A		
JEFFREY C. ELUS		ું જે જિ		
(Name of Person)				
JCE INVESTING, IN	<u>, </u>	(10 mg/s		
(Firm/Company)				
P.D. BOX 611163		-		
(Address)				
ROSEMARY BEACH, FL 324 (City/State and Zip Code)	6	· <u>.</u>		
(Cityrounic and Life Code)				
	_ :			

For further information concerning this matter, please call:

TEFFREY C. EUS

(Name of Person)

at (850) 986-3650

(Area 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 LIABILIT

Y COMPANY	ALIA CARRET
•	TASSER FORM
ENTS, L.L.C.	- SORIO
ice of the Limited Liabilit	y Company is:
Mailing Address:	

ARTICLE I - Name:

The name of the Limited Liability Company is:

RIFTWOOD ESTATES INVESTME

ARTICLE II - Address:

The mailing address and street address of the principal off

Principal Office Address:	Mailing Address:
263 MONTGOMERY STREET	P.O. BOX 611163
SANTA ROSA BEACH, FL	ROSEMARIBEACH, FL
32459	32461

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 263 MONTGO MERY STREET
> Florida street address (P.O. Box NOT acceptable)

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

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 Managing Member(s): The name and address of each Manager or Managing Member is as follows:		
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	JEFFREY C. ELLIS P.O. BOX GIII63 ROSEMARY BEACH, FL 3246	
MGRM	HEIDI M. ELLIS P.D. BOX GIII63 ROSEMARI BEACH, FL 32461	
(Use attachment if necessary)		
NOTE: An additional article must be	added if an effective date is requested.	
REQUIRED SIGNATURE:		
	. Elk	
Signature of a member or an au	thorized representative of a member.	
(In accordance with section 608.4 of this document constitutes an at that the facts stated herein are true.	408(3), Florida Statutes, the execution Tirmation under the penalties of perjury e.)	
JEFFREY C	· EUS nted name of signee	
i ypea or pra	neu mine 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)