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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: OSPALO L. ALSUP, LLC (Name of Limited Liability Company)				
The enclosed Articles of Organization and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
GERALD L. ALSUP (Name of Person)				
GERALD L.ALSUP, LLC				
1007 11th ST. WEST				
(Address)				
PALMETTO, FL 34221				
(City/State and Zip Code)				
For further information concerning this matter, please call:				

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:				
GERALD L. ALSUP,	LLC.			
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liabi	lity Com	pany i	is:
Principal Office Address:  1007 [1th ST. WEST PALMETTO, FL 3422]  ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re	PALMETTO, F. Office, & Registered Agent's Si	T. W.	221	-
GERALD L. A  Name  1007 11th ST  Florida street address (P.O  PALMETTO  City, State, as	FLORIDA 34221		04 HM 72 AM 11: 10	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

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..

Registered Agent's Signatur

Page 1 of 2 (CONTINUED)

	ARTICLE IV- Manager(s) or M The name and address of each Ma	nager or Managing Member is as follows:			
	<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
	MGR	GERALD L. ALSUP 1007 11th St. W. PALMETTO, PL 3422			
	***************************************				
	· · · · · · · · · · · · · · · · · · ·				
	(Use attachment if necessary)				
	NOTE: An additional article must be added if an effective date is requested.  REQUIRED SIGNATURE:				
	(PLAL) Type	L. ALSUP d or printed name of signee			
\$100 \$ 25 \$ 30	g Fees: 0.00 Filing Fee for Articles of Organization 0.00 Designation of Registered Agent 0.00 Certified Copy (Optional) 0.00 Certificate of Status (Optional)				