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(Requestor's Name) (Address)	100034967741
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(City/State/Zip/Phone #)	- 05/18/0401029016 **78.75
(Business Entity Name) (Document Number)	
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Office Use Only	

PF #195

TRANSMITTAL LETTER

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Applicant: The Ezra Project, LLC

Enclosed are an original and one (1) copy of the Articles of Organization and a check for:

\$78.75 Filing Fee and Certificate of Status

From: The Ezra Project, LLC

2451 Palmetto Drive

Longwood, Florida 32779

Telephone: Please contact Beth Crowell, CPA, at 561-747-0272 if your

have questions or need more information.



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 2, 2004

BETH CROWELL, CPA THE EZRA PROJECT, LLC 2451 PALMETTO DR. LONGWOOD, FL 32779

SUBJECT: THE EZRA PROJECT, LLC

Ref. Number: W04000021261

Upon receipt of your letter and/or check(s) totaling \$78.75, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

The fees to form a Florida limited liability company total \$125 (\$100 filing fee and \$25 registered agent designation fee). An additional \$5 is due for the certificate of status.

The total amount due is \$130.00.

There is a balance due of \$51.25.

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) 245-6911.

Brenda Tadlock Senior Section Administrator

Letter Number: 804A00037893

Division of Comparations DO DOY 6227 Tallahasson Florida 2221/

ARTICLES OF ORGANIZATION

The Ezra Project, LLC

A LIMITED LIABILITY COMPANY

(Pursuant to s. 607.407, Florida Statutes)

- 1. Name. The name of the limited liability company is The Ezra Project, LLC.
- 2. <u>Purpose.</u> The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.
- 3. Address of Principal Office. The address of the registered office of the limited liability company is 2451 Palmetto Drive, Longwood, FL. 32779.
- 4. Term of this LLC shall be perpetual.
- 5. <u>Members at Time of Formation</u>. There will be at least one member at the time the limited liability company is formed.
- 6. Period of Duration. The period of duration shall be perpetual.
- 7. <u>Management.</u> Management of the Limited Liability Company at the time of formation is reserved for the initial member(s) whose name(s) and address(es) are as follows:

Initial Members: Mark Jobe 2451 Palmetto Drive Longwood, FL. 32779

Greg Garrett 2451 Palmetto Drive Longwood, FL. 32779

8. Additional Members. The names and addresses of additional members(s) are as follows:

Daniel Whitley, 2451 Palmetto Dr., Longwood, FL. 32779 Kevin DeSalle, 2451 Palmetto Dr., Longwood, FL. 32779

9. Admission of New Members. With the written unanimous consent of the members, new members may be admitted into the LLC upon the payment of such capital contribution and upon such terms as the members unanimously decide. In the event that new members are admitted into the LLC, the share of each new member in

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the profits and losses shall be in such proportion as may be agreed upon between all the members and the new member.

Members Right to Continue Business. The remaining members of the limited liability company shall have the right to continue business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company as further set forth in the Operating Agreement of the limited liability company

Executed this date	5/08/04	
EXECUTED THIS ONE	-, -, -, -, -, -, -, -, -, -, -, -, -, -	

Mark Jobe Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415 or 608.507, Florida Statutes, the undersigned limited liability company submits the following statement to designate a registered office and registered agent in the state of Florida.

- 1. Name. The name of the limited liability company is The Ezra Project, LLC.
- 2. Registered Office. The address of the registered office of the limited liability company is 2451 Palmetto Drive, Longwood, FL. 32779.
- 3. Registered Agent. Mark Jobe, is appointed, and by his signature below accepts appointment, to act as the Registered Agent of The Ezra Project, LLC.

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.

Mark Jobe