

L040000041012

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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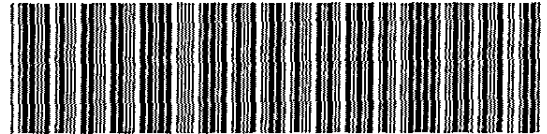
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1000-23001

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GREAT AMERICAN LAND COMPANY, 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:

DAVID H. KNAPP
(Name of Person)

(Firm/Company)

7044 BRIGHTWATER DR
(Address)

KEYSTONE HEIGHTS, FL 32656
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID H. KNAPP at (904) 823-2110
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

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:

GREAT AMERICAN LAND COMPANY, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

7044 BRIGHT WATER DR
KEYSTONE HEIGHTS,
FLORIDA, 32656

Mailing Address:

7044 BRIGHT WATER DR
KEYSTONE HEIGHTS,
FLORIDA, 32656

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

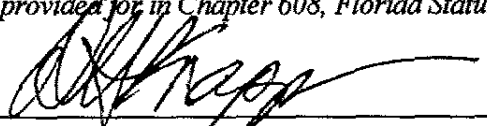
The name and the Florida street address of the registered agent are:

DAVID H. KNAPP
Name

7044 BRIGHT WATER DR
Florida street address (P.O. Box NOT acceptable)

KEYSTONE HEIGHTS, FLORIDA 32656
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..


Registered Agent's Signature

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TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

DAVID H. KNAPP
7044 BRIGHT WATER DR
KEYSTONE HEIGHTS, FL 32656

MGRM

SILARON F. KNAPP
7044 BRIGHT WATER DR
KEYSTONE HEIGHTS, FL 32656

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

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

DAVID H. KNAPP

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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)