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	2CF14 JUN 30 ₱ 12: 58
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(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	
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## TRANSMITTAL LETTER

	istration Section sion of Corporations	· · · · · · ·	··	FILED
SUBJECT:	Michael Barcus	ted Liability Company)	ZOO TALL	THE JUN 30 P 12: 58  CRETARY OF STATE AHASSEE, FLORIDA
The enclosed	Articles of Organization and fee(s) are	submitted for filing.		LURINA
	Please return all corresponde	ence concerning this matte	er to the following:	
	Michael Barco	(Name of Person)		
		(Firm/Company)		
	10293 128th TER	(Address)		<del></del>
	ClEAR WATER,	FC 33777 y/State and Zip Code)		· · · · · · · · · · · · · · · · · · ·
For further in	formation concerning this matter, please	e call:		
Mich	AEI BARUS (Name of Person)	_ ~ ~	47-6769 ime 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 LIABILITY COMPANY

FILED

2004 JUN 30 P 12: 58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE 1 - Name: The name of the Limited Liability Company is:	TALLAHASSEE, FLOR
Michael Barrows, LLC	, CUI
ARTICLE II - Address: The mailing address and street address of the princip	pal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10293 1285 TERR N.	
CLEARWATER, FC 33777	
ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the regis	
Michael Bace	עַכ
10293 128th To Florida street address (P.O. Bo	<del></del>
Clienculater City, State, and Z	FLORIDA 33777
- have regreat as recipious descript and to assent samples	of process for the chose stated limited lightlity

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

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:	2004 JUN 30 P 12: 58 SECRETARY OF STATE TALLAHASSEE, FLORIOA			
MOR	Michael Ba 10293 1286 Clearwater	TERR A. FL 33777			
		· · · · · · · · · · · · · · · · · · ·			
(Use attachment if necessary)					
NOTE: An additional article must be added if an effective date is requested.					
REQUIRED SIGNATURE:  Nucleal Ba  Signature of a member or an a	1.CU.	member.			
(In accordance with section 608, of this document constitutes an a that the facts stated herein are true	.408(3), Florida Statutes, the exiffirmation under the penalties	recution			
Michael Bacco	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)