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## TRANSMITTAL LETTER

FILED

TO: Registration Section

., 2

Division of Corporations

2004 JUL 12 P 3: 29

BookThink

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

CRAIG STARK
(Name of Person)

For further information concerning this matter, please call:

CRAIG STARK at (407) 889-8159 (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 FILED FOR

## FLORIDA LIMITED LIABILITY COMPANN, JUL 12 P 3: 29

ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
BookThink, LLC		
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1564 SILVER FOX CIRCLE	P.O. Box 1329	
APOPKA, FL 32712	APOPKA, FL 32704	
	· · · · · · · · · · · · · · · · · · ·	
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register		
RICHARD C.	EVANS	
4401 VINELAND	BOAD SUITE A-3R	
Florida street address (P.O. Box	<del></del> · ·	

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, Elorida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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ARTICLE IV- Manager(s) or Managi The name and address of each Manager		
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETARY OF STATE TALLAHASSEE, FLORIDA
MRGM	CRAIG STARK 1564 SILVER FOX APOPKA, FL 327	CIRCLE
mgr_	PAMELA PALMER P.O. BOX 381693 GERMANTOWN, TA	/ 38/83
- ,		
(Use attachment if necessary)		
NOTE: An additional article must be REQUIRED SIGNATURE:  Signature of a member or an a	added if an effective date is required to the second secon	_
(In accordance with section 608, of this document constitutes an a that the facts stated herein are true.)	408(3), Fiorida Statutes, the execution ffirmation under the penalties of perjury 1e.)	, .
RICHAR D Typed or pri	nted 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)