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(Requestor's Name)				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Filing Articles of Organization, Sampsonbilt, LLC

Dear Division Representative:

Enclosed please find Articles of Organization for Sampsonbilt, LLC along with a check for the filing fee, designation of Registered Agent and Certificate of Status.

Should you have any questions or require any additional information, please feel free to contact me.

Thank you for your time and assistance.

Sincerely,

Mark G. Sampson 814 10th Ave. W. Bradenton, FL 34205 (941) 713-0525

Enclosures

TRANSMITTAL LETTER

	Registration Section Division of Corporations				
SUBJEC	T: Sampsonbilt, LLC (Name	e of Limited Liability Co	ompany)		_
The enclo	osed Articles of Organization and f	ee(s) are submitted for i	filing.		
	Please return all co	rrespondence concernin	g this matter to the f	ollowing:	
	Mark G. Sampson				
		(Name of Person	1)		
	Sampsonbilt, LLC				
		(Firm/Company)		
81	14 10th Ave. W.				
	Decidentary El. 24205	(Address)		ZOSU . SECT	
	Bradenton, FL 34205	(City/State and Zip C	Code)		ELLE.
For furthe	er information concerning this mat	ter, please call:		23 A III:	1. ma greet 2. may 2 2. may 2 2. may 2
Mark G.	Sampson	at (941	713-0525	21	_
	(Name of Person)	(Area (Code & Daytime Telep	hone 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

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Sampsonbilt, LLC	
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
814 10th Ave. W., Bradenton, FL 34205	814 10th Ave., W, Bradenton, FL 34205

	ECRE J
ARTICLE III - Registered Agent, Registered Office	
The name and the Florida street address of the registered	agent are:
Mark G. Sampson	
Name	2u
814 10th Ave., W.	
Florida street address (P.O. Box N	OT acceptable)
Bradenton FL	ORIDA 34205
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

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:		
MGMR	Mark G. Sampson		
	2214 Ave B		
	Bradenton Beach, FL 34217		
	TX:0 2		
(Use attachment if necessary)	2		
(Ose academical in necessary)			
NOTE: An additional article must be	added if an effective date is requested?		
REQUIRED SIGNATURE: Signature of a member or an ar	uthorized representative of a member.		
	408(3), Florida Statutes, the execution ffirmation under the penalties of perjury ie.)		

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)

Typed or printed name of signee