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(Re	questor's Name)	
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,, (Cit	y/State/Zip/Phone	<i>⇒</i> #)
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VISION OF CORPORATION



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	• • • • •	And the second s	
·			
SUBJECT: MECHANICALLY INCLINED, LLC			
(Name of Lin	nited Liability Company)	. , ,
The enclosed Articles of Organization and fee(s) a	re submitted for filing.	· · · · · · · · · · · · · · · · · · ·	
Please return all correspon	ndence concerning this n	natter to the following:	
CAROL VANCE			
	(Name of Person)		t de la companya de l
			, , ,
	(Firm/Company)		
411 56TH AVENUE			ş i seli i
	(Address)		- i lacent
ST PETE BEACH, FL 33706	· į	· · · · · · · · · · · · · · · · · · ·	
(0	City/State and Zip Code)		早春
For further information concerning this matter, ple	ase call:		23
CAROL VANCE	at (727) 3	87-5156	2 SOF
(Name of Person)		Daytime Telephone Number)	RPORATE ANII: 0

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

		of the principal of	ice of the Limited Liability (Company is:
Principal Office	Address:	j	Tailing Address:	
701 SOUTH HOW	ARD SUITE 205	in the second		
TAMPA, FL 33608	3			
		and white		
	Registered Agent, Re e Florida street address		Registered Agent's Signat	mre: 04 JUL
				04 JUL 23
	e Florida street address	s of the registered		04 JUL 23
	JAMES TALTON 701 S HOWARD SUI	s of the registered	gent are:	04 JUL 23 AM II: 01
	JAMES TALTON 701 S HOWARD SUI Florida street ad TAMPA	Name	gent are:	04 JUL 23

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name a	nd Address:	
"MGR" = Manager			
"MGRM" = Managing Member			
HODE	00118EE	R INVESTMENT HOLDINGS, LLC	i
MGRM			
	701 S HC		 .
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NOTE: An additional article mu	st be added if :	an effective date is requested.	2
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REQUIRED SIGNATURE:	/		. 2
to VIAM		المحارفين المحافد المارات المحافد المح	36
LATINA TIME			.G
Signature of a member of	an amborized re	epresentative of a member.	<u> </u>
On and and and the sands	A 608 408/31 Plan	ida Statutes, the execution	
of this document constitute	a so affirmation o	nder the penalties of perjusy	
that the facts stated herein	are true.)	en e	1 di
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Filing Fee for Articles of Organization			
Designation of Registered Agent			
Certified Copy (Optional)	٠.	The state of the s	· / 型
Certificate of Status (Optional)			ុន្និត្ត ្រូវ