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HONIGMAN

Gayle C. Aiken

(313) 465-7208 Fax: (313) 465-7209 gaiken@honigman.com

Honigman Miller Schwartz and Cohn LLP Attorneys and Counselors

Via FedEx

July 23, 2004

Florida Department of State Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Re: Bunch of Eagles LLC
Double Eagles LLC

Dear Sir/Madam:

Enclosed for filing are the following:

- 1. Articles of Organization for Bunch of Eagles LLC together with our check in the amount of \$155.00 to cover the filing fee and cost of one certified copy.
- 2. Articles of Organization for Double Eagles LLC together with our check in the amount of \$155.00 to cover the filing fee and cost of one certified copy.

The certified copies should be returned to the undersigned.

If you have any questions or problems with regard to this request, please contact the undersigned by telephone call to (313) 465-7208.

Thank you for your assistance and cooperation.

Very truly yours,

Cayle C. Ajken Legal Assistant

Enclosures DET_B.435775.1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Bunch of Eagles LLC			
ARTICLE II - Address: The mailing address and street address of t	the principal office of the Limited Liability Company is		
Principal Office Address:	Mailing Address:		
9912 Wind Tree Boulevard	9912 Wind Tree Boulevard		
Seminole, FL 33772	Seminote, FL 33772		
ARTICLE III - Registered Agent, Regis The name and the Florida street address of	rtered Office, & Registered Agent's Signature:		
The name and the Florida street address of Robert J. Banks	stered Office, & Registered Agent's Signature:		
The name and the Florida street address of Robert J. Banks 9912 Wind Tree Boulevi	Name Name P Registered Agent's Signature: 26 P Remove the registered agent are: 27 28 28 28 28 28 28 28 28 28		
The name and the Florida street address of Robert J. Banks 9912 Wind Tree Boulevi	rtered Office, & Registered Agent's Signature: [the registered agent are: Solution		

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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Robert J. Banks Holdings LLC 9912 Wind Tree Boulevard
	Seminole, FL 33772
(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 secondance 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.)

Robert J. Banks, Authorized Representative of Member Typed or printed name of signee

Filler Feer: \$100.00 Filling Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)