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(Requestor's Name) (Address) (Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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DIVISION OF CORPORATION

4

TRANSMITTAL LETTER

	stration Section sion of Corporations		
SUBJECT:	Midtown Ventures, LLC		
	(Name of Limited Liability Company)		
The enclosed	Articles of Organization and fee(s) are submitted for filing.		
	Please return all correspondence concerning this matter to the following:		
	Darryl E. Rouson, Esq.		
	(Name of Person)		
	Rouson & Brumley, P.A.		
	(Firm/Company)		
	3110 First Avenue North, Suite 5W		_
	(Address)	10	Se
	St. Petersburg, Florida 33713	OUA AUG	SR SR SR
	(City/State and Zip Code)	9	884 754 754
For further in	formation concerning this matter, please call:	PM 2: 03	OF STATE
Darryl E. Ro	at (727) 322-2777	_ ယ _	3
	(Name of Person) (Area Code & Doutime 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

ARTICLE I - Name:	1
The name of the Limited Liability Company is:	· · · · · · · · · · · · · · · · · · ·
Midtown Ventures, LLC	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6538 First Avenue North	6538 First Avenue North
St. Petersburg, FL 33710	St. Petersburg, FL 33710
	9 CAL
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the n	Office, & Registered Agent's Signature; egistered agent are:
Darryl E. Roo	uson, Esq.
Name	
Rouson & Brumley, P.A., 3110	The state of the s
Florida street address (P.C	D. Box <u>NOT</u> acceptable)
St. Petersburg, City, State, a	FLORIDA 33713 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 M		
The name and address of each Ma	anager or Managing Member is as follows:	
Title: "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member	i i	
MGRM	Larry Newsome	
	6538 First Avenue North	
	St. Petersburg, FL 33710	
MGRM	Darryl E. Rouson	
	3110 First Avenue North, Suite 5W	
	St. PEtersburg, FL 33713	
	No. of the last of	- 100.
		a to the same
	<u> </u>	_\$ XX
(Use attachment if necessary)	}	O CAL
		2: 87
NOTE: An additional article m	nust be added if an effective date is requested.	STATE BRATIONS 2: 03
REQUIRED SIGNATURE:		
Qan	15 Cousen	
Signature of a member	dr an authorized representative of a member.	해
(In accordance with sect of this document constituthat the facts stated here	tion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury in are true.)	
	Darryl E. Rouson	
	ed or printed name of signee	in madis," Il land
	· ·	

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)