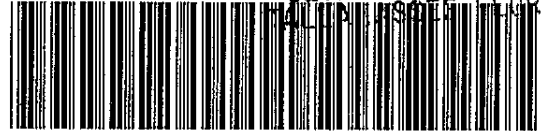


L04000060479 FILED

2004 AUG 12 P 1:41

SECRETARY OF STATE
ALLIANTHUS LLC FLORIDA



700039996727

08/12/04--01042--003 **130.00

(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:

AL

Office Use Only

TRANSMITTAL LETTER

FILED

**TO: Registration Section
Division of Corporations**

2004 AUG 12 P 1:41

SUBJECT: Clothes Line Etc. LLC

**August 11, 2004
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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

Please return all correspondence concerning this matter to the following:

**John Wall
Clothes Line Etc. LLC
316 Hilltop Ave.
Clearwater, Fl. 33755**

For further information concerning this matter, please call: **John Wall at 727-447-3794**

**STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Fl. 32399**

**MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314**

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED

2004 AUG 12 P 1:4

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is: **Clothes Line Etc. LLC**

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1899-C Drew St.
Clearwater, Fl. 33765

Mailing Address:

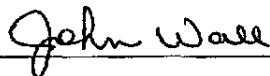
316 Hilltop Ave.
Clearwater, Fl. 33755

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

John Wall
316 Hilltop Avenue
Clearwater, Florida 33755

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

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

Kelley Wall
316 Hilltop Ave.
Clearwater, Fl. 33755

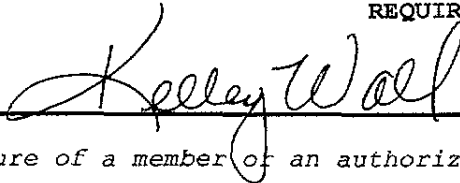
MGRM

John Wall
316 Hilltop Ave.
Clearwater, Fl. 33755

FILED

2004 AUG 12 P 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance 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.)

Kelley Wall

Printed name of signee

August 11, 2004

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)

Enclosed is check for \$130.00 for;
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 5.00 Certificate of Status