

L04 0000 62081

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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THOMAS P. CORLETT

748 Brightside Crescent • Venice, FL 34293
941.497.4608 • tpcorlett@aol.com

15 August 2004

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

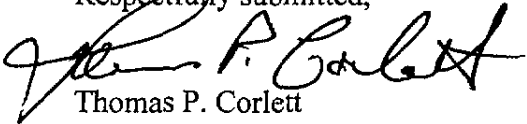
To Whom It May Concern:

Please find enclosed the Article of Incorporation for my Limited Liability Company that I wish to organize in the state of Florida.

My address is as follows:

Thomas P. Corlett
748 Brightside Crescent
Venice, Florida 34293

Respectfully submitted,


Thomas P. Corlett

TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Futurtec, 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:

Steve Vollmer
(Name of Person)

Professional Taxes
(Firm/Company)

425 CROSS ST. Suite 113
(Address)

Punta Gorda, FL 33950-4872
(City/State and Zip Code)

For further information concerning this matter, please call:

Tom Cordett at (330) 327-5841
(Name of Person) (Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

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:

Futurfee, LLC

ARTICLE II - Address:

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

Principal Office Address:

Futurfee, LLC
748 Brightside Crescent
Venice, FL 34293

Mailing Address:

Same

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

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

Steve Vollmer

Name

425 Cross St. Suite 113

Florida street address (P.O. Box **NOT** acceptable)

Punta Gorda, FLORIDA 33950-4872

City, State, and Zip

04 AUG 20 AM 10:56
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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..

Steve Vollmer

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:

MGR

Thomas P. Corlett
748 Brightside Crescent
Venice, FL 34293

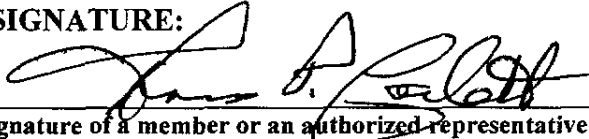
MGRM

Dilipa M. Corlett
248 Brightside Crescent
Venice, FL 34293

(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 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.)

Thomas P. Corlett

Typed or printed name of signee

FILED
TALLAHASSEE, FLORIDA

04 AUG 20 AM 10:56

FILED

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)