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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

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

Please return all correspondence concerning this matter to the following:

R. EPPINGER JR.
(Name of Person)

BEACH, FLORIDA
(City/State and Zip Code)

For further information concerning this matter, please call:

PHILLIP L. GLICKMAN CPA at (305) 652-4241

(Name of Person)

RONALD R. EPPINGER JR. (Area Code & Daytime Telephone Number)

954 - 530-2731

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

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

	FLOR	IDA LIMITED LIABILITY (COMPANY
ARTICLE I		oility Company is:	
UPTON	REACTY	LLC	- 17 - h

Principal Office Address:

ARTICLE II - Address:

Mailing Address:

NE 23 AUENUE#7

BEACH, FLORIDA 33062 POMBANO BEACH, FLORIDA

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

> PHILLIP L. GLICKMAN CPA Florida street address (P.O. Box NOT acceptable) NORTH MIATI BEACH, FLORIDA 33179
>
> City, State, 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 Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member	Royald R Eppinger SR 227 NE 23 Ave 2 TOMORINAIN 1 1 33062	
		···
(Use attachment if necessary)		
REQUIRED SIGNATURE:	e added if an effective date is requested SEE FLOOR 23 PH 2:	<u>.</u>
(In accordance with section 60 of this document constitutes an that the facts stated herein are	authorized representative of a member. 8.408(3) Florida Statutes, the execution affirmation under the penalties of perjury true.) Printed name of signee	

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)