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SEAL OF THE STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Imperial Developments II, 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:

Erik Adams
(Name of Person)

(Firm/Company)

7555 Hwy 98 West
(Address)

Pensacola, FL 32506
(City/State and Zip Code)

For further information concerning this matter, please call:

Erik Adams at (850) 456-6600
(Name of Person) (Area Code & Daytime 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

Imperial Developments II, L.L.C.

ARTICLE II – Address

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

Principal Office Address:
7555 Hwy 98 West
Pensacola, FL 32506

Mailing Address:
7555 Hwy 98 West
Pensacola, FL 32506

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

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


Erik Adams
Name

10466 Heatherwood Drive
Address

Pensacola, FL 32506
City, State, and Zip

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STATE
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, F.S.


(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:

Name and Address:

Manager

Robert Pabian

121 Shoreline Drive

Gulf Breeze, FL 32561

Assistant Manager

Erik Adams

10466 Heatherwood Drive

Pensacola, FL 32507

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.)

Robert Pabian

Type or printed name of signee