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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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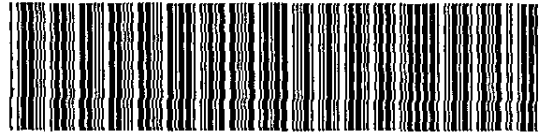
(Business Entity Name)

(Document Number)

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2004 OCT 12 PM 12:19
TALLAHASSEE, FLORIDA

J. BRYAN OCT 13 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Amigos Group, 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:

James P. McMahon
(Name of Person)

(Firm/Company)

1995 Waters Edge
(Address)

Westlake, OH 44145
(City/State and Zip Code)

For further information concerning this matter, please call:

Seamus McMahon, Esq. at (216) 621-1000
(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

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

FILED
2004 OCT 12 PM 12:19
OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Amigos Group, LLC

ARTICLE II - Address:

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

Principal Office Address:

5944 Sand Wedge Lane #1105

Naples, Florida 34110

Mailing Address:

1995 Waters Edge

Westlake, OH 44145

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

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

Jim McMahon

Name

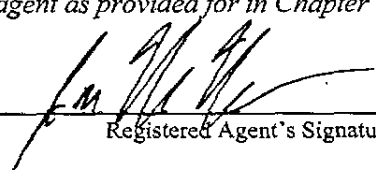
5944 Sand Wedge Lane #1105

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

Naples, FLORIDA 34110

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

