

W4000086103

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W4-86103
OK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ESCO-LAR ENTERPRISES, 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:

DEREK M. ESCOBAR
(Name of Person)

ESCO-LAR ENTERPRISES, LLC
(Firm/Company)

4050 COASTAL HIGHWAY
(Address)

ST. AUGUSTINE, FL. 32084
(City/State and Zip Code)

For further information concerning this matter, please call:

NETTIE J. LARGER at (904) 829-0477
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed) |
|--|---|--|---|

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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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ESCO-LAR ENTERPRISES, LLC

ARTICLE II - Address:

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

Principal Office Address:

7780 SW 19 St.
MIAMI, FL. 33155

Mailing Address:

4050 COASTAL Hwy.
ST. AUGUSTINE, FL 32084

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

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

DEREK M. ESCOBAR
Name

4050 COASTAL HIGHWAY
Florida street address (P.O. Box NOT acceptable)

ST. AUGUSTINE FL 32084
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, F.S.

Derek M. Escobar
Registered Agent's Signature

FILED
MAR 15 2008
CLERK OF CIRCUIT COURT
FLORIDA

(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

"MGRM" = Managing Member

Name and Address:

MGR 50%

DEREK M. ESCOBAR
7780 SW 19 ST.
MIAMI, FL 33155

MGRM 25%

NETTIE J. LARGER
4050 COASTAL HWY.
ST. AUGUSTINE, FL 32084

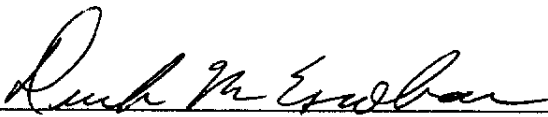
MGRM 25%

VICTOR LARGER
4050 COASTAL HWY.
ST. AUGUSTINE, FL 32084

(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.)

DEREK M. ESCOBAR
Typed or printed name of signee

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MAR 22 PM 1:55
TALLAHASSEE, FLORIDA

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)