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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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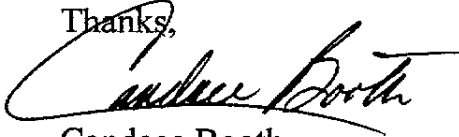
November 20, 2004

Florida Dept of State  
Registration Section  
Division of Corporations  
409 E Gaines St  
Tallahassee, Fl 32399

Hello:

This is just a cover letter with the enclosed filing document. We are starting an LLC – please let us know what else you may need.

Thanks,

A handwritten signature in black ink, appearing to read "Candace Booth", written over a horizontal line.

Candace Booth

RECEIVED  
2004 NOV 23 P 1:47  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: \_\_\_\_\_

FAST TRAX 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:

CANDACE BOOTH  
(Name of Person)

FAST TRAX ENTERPRISES LLC  
(Firm/Company)

3607 Bayshore Circle  
(Address)

Tavares FL 32778  
(City/State and Zip Code)

For further information concerning this matter, please call:

CANDACE BOOTH at (352) 735-2966  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☒ \$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

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

FAST TRAX Enterprises LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

3607 Bayshore Circle  
TAVARES, FL 32778

**Mailing Address:**

3607 Bayshore Circle  
TAVARES, FL 32778

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

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

GARY YATES  
Name  
3607 Bayshore Circle  
Florida street address (P.O. Box **NOT** acceptable)  
TAVARES FL FL 32778  
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..

Gary J Yates  
Registered Agent's Signature

(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

Managing Member

Managing Member

Candace Booth  
3607 Bayshore Circle  
Tallahassee, FL 32378

Amanda Wellhofer  
3607 Bayshore Circle  
Tallahassee, FL 32378

Gary Yates  
3607 Bayshore Circle  
Tallahassee, FL 32378

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

Candace Booth  
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.)

Candace Booth  
Typed or printed name of signee

2001 NOV 23 P 1:47  
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TALLAHASSEE, FL  
SECRETARY OF STATE

FILED

**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)