LD4000087603

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600042701576

11/15/04--01045 -012 ***125.00

2004 DEC -2 PM 1: 17

2004 DEC -2 PM 1: 17

ANASSEE FLORIDA

WO4-42657 J. BRYAN NOT 1 9 2004

J. BRYAN DEC 9 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIDA VENTURES 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:

B Douglas FAA/EY II

(Name of Person)

FLORIDA VENTURES LLC

(Firm/Company)

4708 HIDDEN RIVER RID

(Address)

SARASOFA, FLORIDA 34240

(City/State and Zip Code)

For further information concerning this matter, please call:

B Douglas FRA/EY II at (941) 322-2490
(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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 19, 2004

B DOUGLAS FRALEY II FLORIDA VENTURES 4708 HIDDEN RIVER RD SARASOTA, FL 34240

SUBJECT: FLORIDA VENTURES Ref. Number: W04000042657



We have received your document for FLORIDA VENTURES and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 504A00065995

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2004 DEC -2 PM 1: 17 2004 DEC -2 PM 1: 17 2004 DEC -2 PM 1: 17
- BC -

A	RTI	\sim T	Tr'	T _	Na	ma.
А	KIL	. .		1 -	1111	me:

The name of the Limited Liability Company is:

FLORIDA VENTURES LLC

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
4708 HIDDEN RIVER RD	4708 HIDDEN RIVERRD
SARASOTA, FLORIDA	SARASOFA, FLORIDA
34240	34240

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

B Douglas FRALEY II

Name

4708 HIDDEN RIVER RD

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

SARASOFA FLORIDA 34240 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)

ng Member(s):					
or Managing Member is as follows:					
Name and Address:					
TO T					
B. Douglas FRALEY II					
B. Douglas FRALEY IL TO 4708 HIDDEN RIVER ROAD					
SARASOFA, FLORIDA 34240					
AMELIA LYONS					
AMELIA LYONS 8355 SW LIVERPOOL RD ARCADIA, FLORIDA 34269					
ARCADIA, FLORIDA 34284					
NOTE: An additional article must be added if an effective date is requested.					
REQUIRED SIGNATURE:					
B Dela Finley					

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)

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

B Douglas FRAIEY II

Typed or printed name of signee

that the facts stated herein are true.)