Division of Comprations Florida Department of State Pagent of 1

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H040002533673)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

LIMITED LIABILITY COMPANY

Targator Partners, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

Electropic Filing Menu,

Corporate Filing

Public Access Help

JUSTES OF COMPURATION

3/

H04000253367

ARTICLES OF ORGANIZATION FOR ORIDALIMITED LIABILITY COMPAN

	DRIDA LIMITED LIABILITY COMPANY	
ARTICLE I - Name The name of the Limited Liability Comp	vanyis: Targator Partners, LLC	
ARTICLE II - Address The mailing address and street address of	of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
3028 Willow Oak Drive	3028 Willow Oak Drive	
Edgewater, FL 32132	Edgewater, FL 32132	
ARTICLE III - Registered Age The name and Florida street address of	Put, Registered Office & Registered Agent's Signature the registered agent are: Thomas E. Howard Name 3028 Willow Oak Drive (P.O. Box or Mail Drop Box NOT Acceptable)	SECRE JANY OF STATE AND A ASSEE 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.

(City / State / Zip)

Edgewater, FL 32132

Registered Agent's Signature - Thomas E. Howard

ARTICLE IV - Manager(s) The name and address of each Ma	or Managing Member(s): anager or Managing Member is as follows:	H04	0002	!5 3 3
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGRM	Thomas E. Howard-3028 Willow Oak Drive, Edgewater, F	L32132		-
				_
(Use attachment if necessary)				
REQUIRED SIGNATURE:				
	Itumas & Itomard			
(In accord document	re of a member or authorized representative of a member. Iance with section 608.408(3), Florida Statutes, the execution of constitutes an affirmation under the penalties of perjury that th ein are true.)			
	Thomas E. Howard	JAT SE	200	
	Typed or printed name of signee	CREJARY OF ST	2004 DEC 27 NH 9	FILED