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05 FEB -7 PM 12:48

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SUBJECT: Articles of Organization for GREAT EXPECTATIONS L.L.C.

The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

Rhonda Kay Sears

(Name of Person)

Great Expectations, L.L.C.

(Firm/Company)

5133 9th Ave S

(Address)

Gulfport, Florida 33707

(City/State and Zip Code)

For further information concerning this matter, please call X at (727) 501-3791

STREET ADDRESS: MAILING ADDRESS:

5133 9th Ave S
Gulfport, FL 33707

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

GREAT EXPECTATIONS L.L.C.
EIN: 20-2181250

ARTICLE II - Address:

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

5133 9th Avenue S
Gulfport, FL 33707

Principal Office Address: Mailing Address:

5133 9th Avenue S
Gulfport, FL 33707

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

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

Name

Rhonda Kay SEARS

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

5133 9th Avenue S, Gulfport, FLORIDA 33707

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

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05 FEB - 7 PM 12:48
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR: Rhonda Kay Sears
5133 9th Avenue S
Gulfport, FL 33707

Title: Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

(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.)

Rhonda Kay Sears

Typed or printed name of signee

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)