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2005 FEB 2 P 12: 50 (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) MAIL PICK-UP WAIT (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status Special Instructions to Filing Officer:

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02/21/05--01052--022 **125.00

TRANSMITTAL LETTER

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TO: Registration Section Division of Corporations 2005 FEB 21 P 12: 50 (Name of Limited Liability Company) SECRETARY OF STATE TALLAHASSEE, FLORIDA The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Suzanne M. Wesley
(Name of Person) (Firm/Company) 5806 Corrac Lake Brive (Address)

Margate FL 33063

(City/State and Zip Code) For further information concerning this matter, please call: Suzanne M. Wesley at (954) 461-0533 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$\sqrt{2}\$ \$125.00 Filing Fee

\$\sqrt{2}\$ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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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P 12: 50

| ARTICLES OF ORGANIZATION FOR FI | LORIDA LIMITED LIABILITY COMPANY 2005 FEB 21 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|
| ARTICLE I - Name: The name of the Limited Liability Company is: | Sense of |
| ARTICLE II - Address: The mailing address and street address of the property o | rincipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 5806 CORAL LAKE Drive Margate FL 33063 | Same |
| ARTICLE III - Registered Agent, Registered | d Office, & Registered Agent's Signature: |

Suzanne M. Wesley

Name

5806 Coral Lake Drive

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

Margate FL 33063

City, State, and Zip

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

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..

Stogsme W Wesley
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:

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| <u>Title:</u> "MGR" = Manager | Name and Address: | 2005 FE∂ 21 P I2: 50 |
|----------------------------------|---------------------------------------------------|-----------------------------------------|
| "MGRM" = Managing Member | ^ | SECRETARY OF STATE TALLAHAGSEE, FLORIDA |
| MGR | SUZANNE M. WES 5806 CORAL LOKE Margute FL 3 | Drive |
| MGR | Mary Ann Aller 2150 Mars Road Livermore CA | <u> </u> |
| | | |
| | | |
| (Use attachment if necessary) | | |
| NOTE: An additional article must | be added if an effective date is re | equested. |

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.)

Suzanne M Wesley
Typed or printed name of signee

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)