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AND ANALYSEE, FLORIDA

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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Independence Properties, 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:		
Russ Connell (Name of Person)		
(F	irm/Company)	
18742 SW	55+4 5+. (Address)	
	FL 33029 State and Zip Code)	
For further information concerning this matter, please call:		
Russ Connell (Name of Person)	at (954) \$579-8555 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is Enclosed)	
STREET ADDRESS:	MAILING ADDRESS:	

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

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:

Independence Properties, 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:
18742 SW 55th St. 18742 SW 55th St. Miramar FL 33029 Miramar FL 33029
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Russ Connell
18742 SW 55th St.  Florida street address (P.O. Box NOT acceptable)
Miramar FL 33029 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

(CONTINUED)

Registered Agent's Signature

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## 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:
MGRM	Russ Connell 18742 SW 55th St. Miramar, FL 33029
(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.)

RUSS CONNELL
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)