

LOS 0000 19346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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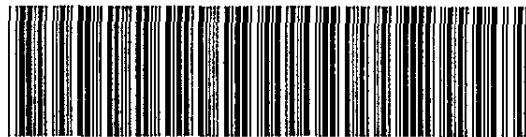
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2005 FEB 25 PM 3:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02/08/05--01007--010 **125.00

LOS-19346
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 11, 2005

JACKIE LYNN MACZUGA
19103 ROSEWOOD CREEK WAY
TAMPA, FL 33647

SUBJECT: CHILDREN'S PLAYHOUSE II, L.L.C.
Ref. Number: W05000007401

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TALLAHASSEE, FLORIDA

We have received your document for CHILDREN'S PLAYHOUSE II, L.L.C. 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 operating agreement is not filed with our office.,

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 405A00009864

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHILDREN'S PLAYHOUSE II, L.L.C.
(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:

JACKIE L. Maczuga

(Name of Person)

CHILDREN'S PLAYHOUSE II, L.L.C.

(Firm/Company)

19103 Rosewood Creek Way

(Address)

Tampa, FL 33647

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Jackie maczuga

(Name of Person)

at (813) 558-8576

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CHILDREN'S PLAYHOUSE II, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

19103 Rosewood Creek Way

Tampa, FL 33647

Mailing Address:

Same

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

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

Jackie L. Maczuga

Name

19103 Rosewood Creek Way

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

Tampa

FL

33647

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..


Registered Agent's Signature

(CONTINUED)

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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

Jackie L. Maczuga

19103 Rosewood Creek Way

Tampa, FL 33647

MGRM

Michael A. Maczuga Michael A. Maczuga

19103 Rosewood Creek 19103 Rosewood Creek

Tampa, FL 33647

MGRM

Joyce A. Soukup

14602 Pine Glen Circle

Lutz, FL 33559

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(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.)

Joyce A. Soukup

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)