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(City/State/Zip/Phone #)

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03/11/05 PM 1:25

Robert C. Nettleton

Attorney at Law

(863) 422-6484

Fax (863) 421-9618

30 North Sixth Street

Post Office Box 277

Haines City, Florida 33845-0277

March 7, 2005

Registration Section

Division of Corporations

P. O. Box 6327

Tallahassee, Florida 32314

Re: Limited Liability Company

South By Southwest Innovations, LLC

Dear Sir:

Enclosed, please find Original and one copy of Articles of Organization For Florida Limited Liability Company in the above regard.

Also enclosed is my trust account check in the amount of \$160.00 representing the filing fee, Certificate of Status & Certified Copy

Very truly yours,



Robert C. Nettleton

RCN/jn

Enclosures

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOUTH BY SOUTHWEST INNOVATIONS, 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:

ROBERT C. NETTLETON, ESQUIRE
(Name of Person)

ROBERT C. NETTLETON, ATTORNEY AT LAW
(Firm/Company)

P. O. BOX 277
(Address)

HAINES CITY, FLORIDA 33845
(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT C. NETTLETON at (813) 422-6484
(Name of Person) (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 checked="" 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:

SOUTH BY SOUTHWEST INNOVATIONS, LLC

ARTICLE II - Address:

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

Principal Office Address:

40902 HIGHWAY 27, SUITE #1
DAVENPORT, FLORIDA 33837

Mailing Address:

SAME AS PRINCIPAL OFFICE ADDRESS

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

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

JAN P. BOWEN

Name

2201 LAKE BROWN DRIVE

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

HAINES CITY, FL 33844

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)

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:

MGR

JAN P. BOWEN

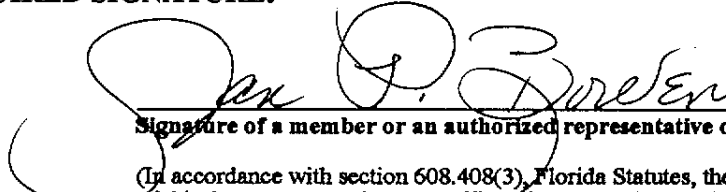
2201 LAKE BROWN DRIVE

HAINES CITY, FLORID 33837

(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.)
JAN P. BOWEN
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)