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2005 APR 13 P 1:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

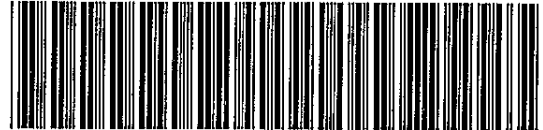
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**TRANSMITTAL LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Harvey Creative Design, LLC

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

Thomas E. Harvey  
14840 Shipwatch Trace, #1922  
Largo, FL 33774-5724

For further information concerning this matter, please call:

Thomas E. Harvey at (813) 874-3811 ext. 215

Enclosed is a check for the following amount:

\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

**FILED**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Submit to:  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is Harvey Creative Design, LLC. 2005 APR 13 P 1:38

**ARTICLE II - Address:**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Harvey Creative Design, LLC  
14840 Shipwatch Trace, #1922  
Largo, FL 33774-5724

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

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

Thomas E. Harvey  
14840 Shipwatch Trace, #1922  
Largo, FL 33774-5724

*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

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

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

Title:	Name and Address:
MGRM	Thomas E. Harvey

**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.)

Thomas E. Harvey  
Typed or printed name of signee