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(City/State/Zip/Phone #)

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Skyline Energy, 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:

Marc S. Wise, Esq.
(Name of Person)

Raymond & Prokop, P.C.
(Firm/Company)

26300 Northwestern Highway, 4th Floor/P.O. Box 5058
(Address)

Southfield, MI 48086-5058
(City/State and Zip Code)

For further information concerning this matter, please call:

Marc S. Wise, Esq. at (248) 357-3010
(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



• Marc S. Wise
mwise@raypro.com

Direct Dial: (248) 263-3738
Southfield Office

May 10, 2005

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: **Skyline Energy, LLC**

Dear Sir or Madam:

Enclosed herewith for filing please find the Articles of Organization for Skyline Energy, LLC along with a check in the amount of \$160.00 representing the filing fee. Please send confirmation of the filing to my attention. For your convenience a self-addressed envelope has been enclosed.

If you should have any questions or comments with regard to this matter, please do not hesitate to contact me.

Sincerely,

RAYMOND & PROKOP, P.C.


Zarefa Marini
Paralegal

ZM/dms
Enclosure

cc: Marc S. Wise (w/enclosures)

500402_1.DOC

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SKYLINE ENERGY, LLC

ARTICLE II - Address:

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

Principal Office Address:

22651 Fairlawn Court
Bonita Springs, FL 34135

Mailing Address:

22651 Fairlawn Court
Bonita Springs, FL 34135

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

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

John Byrd

Name

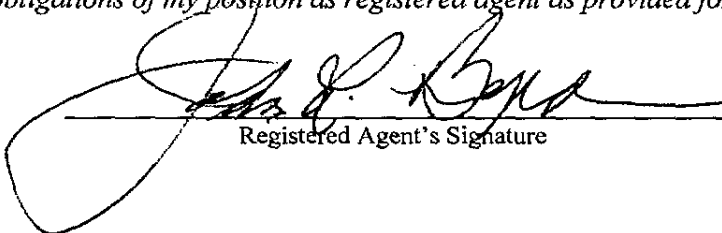
22651 Fairlawn Court

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

Bonita Springs, Florida 34135

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

John Byrd

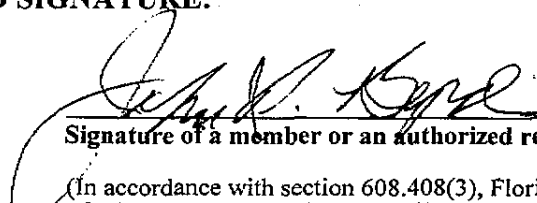
22651 Fairlawn Court

Bonita Springs, FL 34135

(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.)

John Byrd, Member
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)