L05000050880

(Requestor's Name) (Address) (Address)	TALLAHASS 000053674460
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	- 05/17/0501059023 **160.00
(Document Number) Certified Copies Certificates of Status	-
Special Instructions to Filing Officer:	

Office Use Only

PATRICK C. CROWELL, P.A.

PROFESSIONAL ASSOCIATION ATTORNEY AT LAW

FILED

4853 S. Orange Avenue, Suite B Orlando, FL 32806

2005 HAN7/1291-150 12: 24 Fax (407) 251-11182: 24 SECRETARY OF STATE TALLAHASSEE, FLORIDA

May 13, 2005

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

Re:

SkyJay Properties, LC

Dear Sir or Madam:

Please find enclosed the original and one (1) copy of the Articles of Organization to be filed for the above-named limited liability company. Also find enclosed check # 6445 in the amount of \$160,00 to cover the cost of filing, certificate of status and a certified copy.

\$125.00	Filing fee
\$ 30.00	Certified copy
\$ 5.00	Certificate of Status
\$160.00	TOTAL

Please file the original of the enclosed Articles of Organization and return a certified copy to:

> Patrick C. Crowell, Esquire Patrick C. Crowell, P.A. 4853 S. Orange Avenue Suite B

Orlando, FL 32806

Your prompt attention to this matter would be appreciated. If you have any questions, please do not hesitate to call me at 407-251-1131.

Respectfully,

Patrick C. Crowell

For the Firm

PCC/mc Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED L

2005 HAY 17 P 12: 25

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE TALLAHASSEE. FLORIDA

SkyJay Properties, LC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4853 S. Orange Avenue

Suite B

Orlando, FL 32806

4853 S. Orange Avenue

Suite B

Orlando, FL 32806

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

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

Patrick C. Crowell, Esquire Patrick C. Crowell, P.A. 4853 S. Orange Avenue Suite B Orlando, FL 32806

Having been named as registered agent and to accept service of process for the abovestated 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 N	vlanaging Member is as follows:		
The name and address of each Manager or N	FILE	. Г	ļ

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

2005 MAY 17 P 12: 25

MGRM

Patrick C. Crowell 4815 Backacre Lane Orlando, FL 32806 SECRETARY OF STATE TALLAHASSEE, FLORIDA

MGRM

Maureen G. Crowell 4815 Backacre Lane Orlando, FL 32806

REQUIRED SIGNATURE:

Signature of 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.)

Typed or printed name of signee