L0500005/509

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(Business Entity Name)

(Document Number)

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2005 MAY 18 P 3: 05

SECRETARY OF STATE TALLAHASSEE. FLORIDA

May 12, 2005

JIM WILDER P.O. BOX 3274 FT. WALTON BEACH, FL 32547

SUBJECT: JOHN W GAREA, LLC Ref. Number: W05000024233

We have received your document for JOHN W GAREA, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 305A00034366

TRANSMITTAL LETTER

FILED

TO:

Registration Section Division of Corporations

SUBJECT: JOHN W GAREA, LLC ECRETARY OF STATE (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: JIM WILDER (Name of Person) JIM WILDER AND ASSOCIATES, LLC (Firm/Company) PO BOX 3274 (Address) FT WALTON BEACH, FL 32547 (City/State and Zip Code) For further information concerning this matter, please call: JIM WILDER (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

Certificate of Status

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

□ \$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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY 30 OMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETARY OF STATE TALLAHASSEE. FLORIDA
JOHN W GAREA, LLC	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1506 ROYAL PALM DR	SAME AS OFFICE
NICEVILLE, FL 32579	
ARTICLE III - Registered Agent, Registered	
The name and the Florida street address of the re-	egistered agent are:
JIM WILDER Name	<u> </u>
	ress (P.O. Box NOT acceptable)
FT WALTON BEACH 32547 City, State, a	
Having been named as registered agent and to a	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: Name and Address: Title: "MGR" = Manager 2005 HAY 18 P 3: 06 "MGRM" = Managing Member SECRETARY OF STATE JOHN W GAREA MGRM TALLAHASSEE, FLORIDA 1506 ROYAL PALM DR NICEVILLE, FL 32579 (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.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

JOHN W GAREA

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee