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(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
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ALLAHASSEE, FLORIBALITATISHE FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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		Art of Inc. File	_
	· · · · · · · · · · · · · · · · · · ·	LTD Partnership File	
		Foreign Corp. File	
		L.C. File	-
		Fictitious Name File	
		Trade/Service Mark	A-
		Merger File	
		Art. of Amend. File	
		RA Resignation	
		Dissolution / Withdrawal	-
		Annual Report / Reinstatement	
		Cert. Copy	
		Photo Copy	- war term
		Certificate of Good Standing	-
		Certificate of Status	
		Certificate of Fictitious Name	
		Corp Record Search	
		Officer Search	
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Q:		Fictitious Owner Search	
Signature		Vehicle Search	
		Driving Record	
Requested by:	,	UCC 1 or 3 File	. .
-Sp	5/20/05 3:25	UCC 11 Search	
Name	Date Time	UCC 11 Retrieval	. :
Walk-In	Will Pick Up	Courier	

ARTICLE I - Name: The name of the Limited Liability Company is: CO50bc110 ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Florida ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: 3000 UVIOHON UMC Florida street address (P.O. Box NOT acceptable) 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 - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. (An additional article must be added if an effective date is requested)

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 perjusy

Typed or printed name of signee

that the facts stated herein are true.)

Filing Feen:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)