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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	· <u> </u>
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

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Brandon Law Offices of

## Jan Soeten, Jr., P.A.

2119 W. BRANDON BLVD., SUITE F BRANDON, FLORIDA 33511-4731 TELEPHONE: (813) 685-2505 FAX: (813) 653-4881

WEBSITE: www.brandonlaw.com EMAIL: jansoeten@direcway.com

July 20, 2005

DEPARTMENT OF STATE Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

RE: GOLDDIGGERS, LLC

Dear Sir/Madam:

Enclosed herewith please find the following:

- (1) The original Articles of Organization for GOLDDIGGERS, LLC (containing a designation of registered agent).
- (2) A copy of the articles for certification.
- (3) A check in the amount of \$155.00, representing (a) filing fee in the sum of \$100.00; (b) designation of registered agent fee in the sum of \$25.00; and (c) certified copy fee in the sum of \$30.00.

I kindly request that you file these Articles of Organization and return a certified copy to me at the address listed above. Thank you for your attention, and I remain

Sincerely yours,

JAN SOETEN, JR., ESQUIRE

JS:ds

Enclosures

cc: Robert A. DiGiorgio

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: GOLDDIGGERS, LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company are: Principal Office Address: Mailing Address: 5418 S.W. 2nd Avenue 5418 S.W. 2nd Avenue Cape Coral, Florida 33914 Cape Coral, Florida 33914 ARTICLE III - Registered Agent, Registered Office, and Registered Agent's Signature: The name and Florida street address of the registered agent are: ROBERT ANTHONY DIGIORGIO Name 5418 S.W. 2nd Avenue Florida street address (P.O. Box NOT acceptable) Cape Coral, Florida 33914 City, State, 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

ARTICLE IV - Manager(s) ("MGR") or Managing Member(s) ("MGRM"):
The name and address of each Manager or Managing Member are as
follows: (use attachment if necessary)

Title:

Name and Address:

MGR

ROBERT ANTHONY DIGIORGIO

50% Owner

Supermoder State S.W. 2nd Avenue

Cape Coral, Florida 33914

MGRM

THE RUSSELL FAMILY TRUST UDT (dtd 10/26/04)

c/o Robert P. and Kim M. Russell, Co-Trustees
31935 Via Pavo Real
Coto De Caza, California 92679

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

(In accordance with Section 608.408(e), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ROBERT ANTHONY DIGIORGIO

Typed or printed name of signee

Filing Fees:

\$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)