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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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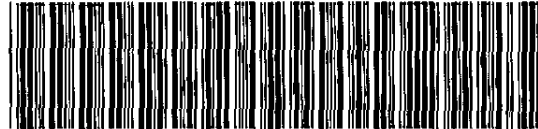
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(Business Entity Name)

(Document Number)

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REPLY TO: Deltona

August 4, 2005

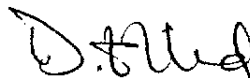
Department of State
Division of Corporations
Corporate Filings
Post Office Box 6327
Tallahassee, FL 32314

RE: New LLC Filing - Collier's Enterprises, LLC

Dear Sir/Madam:

Enclosed for filing, please find an original and one copy of Articles of Organization for Florida Limited Liability Company for Collier's Enterprises, LLC along with a money order in the amount of \$125.00. Please return a file stamp copy in the enclosed self-addressed, stamped envelope. Thank you for your assistance in this matter. If you have any questions or need anything further, please do not hesitate to contact our office.

Very truly yours,



Darren J. Elkind

(Signed in Mr. Elkind's absence to avoid delay)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DJE/fes
Enclosures
#111



**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

The name of the Limited Liability Company is:

Collier's Enterprises, LLC

ARTICLE II – Address:

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

Principal Office Address:

Mailing Address

418 South Clara Avenue

Same

DeLand, FL 32720

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

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

Monique D. Collier

Name


418 South Clara Avenue

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

DeLand, FL 32720

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, Florida Statutes


Registered Agent's Signature

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:

MGRM

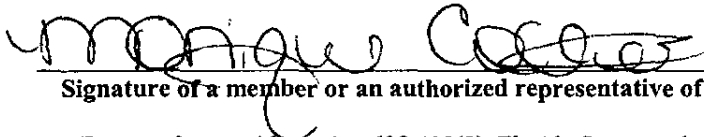
Monique D. Collier
418 South Clara Avenue
DeLand, FL 32720

MGRM

Eugene Collier, III
324 Heritage Estate
DeLand, FL 32720

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)

Monique D. Collier

Typed or Printed name of signee

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