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NUMBER OF THE PHORIDA

TALLAMASSEE, FLORIDA

J. BRYAN AUG 1 1 2005

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Real Estate (Name of Limited)	Circle LU d Liability Company)	<u></u>
The enclosed Articles of Organization and fee(s) are su	ubmitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
Laura	North Vame of Person)	
· ·		THE THE TO PA I TO THE PERSON OF THE PERSON
η	Firm/Company)	
11530	Sampier Ct	CORD PAR
New Port Ri	State and Zip Code)	4654
For further information concerning this matter, please of	call:	
Lava North (Name of Person)	at (727) 849 (Area Code & Daytime Te	2-5851 elephone Number)
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & 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	MAILING A Registration S Division of Co	ection

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

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Real Estate Circle, 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:			
10928 Airview Dr. P.O. Box 272876 Tampa, FL 33688 55 0			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:			
The name and the Florida street address of the registered agent are:			
Laura North Name			
Florida street address (P.O. Box NOT acceptable)			
New Post Richard 34654 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, 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:

Title: "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGR -	Laura North 11530 Dampier Ct. New Port Richey, FL 34654	
MGRM	Susan North 345 Bayshore Blud #611 Tampa, FL 33606	
mGRM	David Cass Cass Plumbing TAC. P.O. Box 272876 Tampa, FL 34688	
mo-Rm	Bernie O'Brien 4009 Hudson Lare Tampa, FL 33624 3 5	
(Use attachment if necessary)		
NOTE: An additional article must be added if an effective date is requested.		
REQUIRED SIGNATURE:	Tampa FL 33624 3 3 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 perjury that the facts stated herein are true.)		

Filing Fees:

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

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Laura NorTh
Typed or printed name of signee

. Article IV (cont.)

MGRM

Bob Mattull William Muttull Bot of West Florida, Inc. 8812 Venture Cove, Suite B Tampa, FL 33637

MGRM

Greg Johnson JBG Distributing 6528 Seafairer Dr. Tampa, FL 33615

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