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DIVISION OF CORPORATIONS  
05 AUG 26 PM 1:38

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Elam Investors, LLC  
(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:

W. Parkinson Myers

(Name of Person)

(Firm/Company)

3340 Crenshaw Lake Road

(Address)

Lutz, FL 33548

(City/State and Zip Code)

For further information concerning this matter, please call:

W. Parkinson Myers

(Name of Person)

at ( 813 ) 963-7139

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

**ARTICLES OF ORGANIZATION  
OF  
ELAM INVESTORS, LLC**

The undersigned Member or Authorized Representative of a Member signs these Articles of Organization and forms a limited liability company (the “**Company**”) under the Florida Limited Liability Company Act (the “Act”), as follows:

**ARTICLE I.  
NAME**

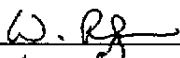
The name of the Company is: Elam Investors, LLC.

**ARTICLE II.  
MAILING ADDRESS AND STREET ADDRESS**

The mailing address and street address of the principal office of the Company is: 3340 Crenshaw Lake Road, Lutz, Florida 33548.

**ARTICLE III.  
INITIAL REGISTERED OFFICE AND AGENT**

The name and street address of the initial registered agent and office of the Company are: W. Parkinson Myers, 3340 Crenshaw Lake Road, Lutz, Florida 33548.

  
\_\_\_\_\_  
Signature of a member or an authorized  
representative of a member  
**W. Parkinson Myers**  
(Typed or printed name of signee)

**ACCEPTANCE BY REGISTERED AGENT**

I accept the appointment as registered Agent of the Company to accept service of process on its behalf at the place designated in these Articles of Organization. I am familiar with, and accept, the obligations of my position as registered agent as provided for in the Act.

  
\_\_\_\_\_  
**W. Parkinson Myers**

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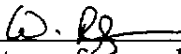
**ARTICLE IV.**  
**MANAGER(S) OR MANAGING MEMBER(S)**

**Title:**

MGR

**Name and Address:**

W. Parkinson Myers  
3340 Crenshaw Lake Road  
Lutz, Florida 33548

  
\_\_\_\_\_  
Signature of a member or authorized  
representative of a member.

**W. Parkinson Myers**

Typed or printed name of signee

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