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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : I20030000043 Phone : (800)342-9856 Fax Number : (800)354-3381

E Fax Number ⊆

LIMITED LIABILITY COMPANY

SUN QUENCHERS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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Public Accesses Halls

J. BRYAM SEP 8 2005

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MCANY MID. 33 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CO

ARTICLE I - Name:

The name of the Limited Liability Company is:

SUN QUENCHERS, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

133 LARCHMONT TERRACE

SEBASTIAN, FL 32958

133 LARCHMONT TERRACE

SEBASTIAN, FL 32958

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

EILEEN POLLACEK

Name

133 LARCHMONT TERRACE

Florida street address (P.O. Box NOT acceptable)

SEBASTIAN

FL 32958

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 (REQUIRED)

(CONTINUED) Page 1 of 2

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T(* 41	Manage and Address.
Title:	Name and Address:
"MGR" = Manager	3//
"MGRM" - Managing Member	χ,
MGRM	Name and Address: ERIC PETERSON 1614 5th AVENUE BAY SHORE, NY 11706
	1614 5th AVENUE
	BAY SHORE, NY 11706
	•
<u> </u>	
(Use attachment if necessary)	
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LE V: Effective date, if other than the	e date of filing: (OPTION
fective date is listed, the date must b	be specific and cannot be more than five business da
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days after the date of filing.)	
days after the date of filing.) REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	lere≥ser~
REQUIRED SIGNATURE:	er or an authorized representative of a member.
REQUIRED SIGNATURE: Signature of a memb	er or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury