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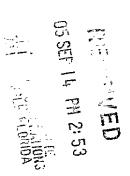
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OS SEP II PH 2: 59
TALLAHASSEE, FLORIO



SEP 1 4 2005

COVER LETTER

TO:		tration Section of Corp			
SUBJI	ECT: _	Pro	Fessional Haue (Name of Limited	Company)	
The en	closed A	Articles of	Organization and fee(s) are su	bmitted for filing.	
Please	return a	ll correspo	ondence concerning this matter	to the following:	
		Res	ed Delane Br	Yame of Person)	
			ofessional Home		
			(I	Firm/Company)	= -
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		<u>42 a</u>	varie circle	(Address)	05 SEP
					ASSER.
		60awi	Fordville, Ft. 325	Z.7 State and Zip Code)	P
			(City/	State and Zip Code)	2: 59 SLAN FLORI
For fur	ther info	ormation c	oncerning this matter, please c	all:	59 DRIDA
K	Port.	Brown (Name o		at (850) 251-456	\$ "7
		(Name	of Person)	(Area Code & Daytime Tel	
Enclos	sed is a	check for	r the following amount:		
\$12:	5.00 Fil	ling 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)
			Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center (Tallahassee, FL 32301	s

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compan	y is:	
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	ne principal office of the Limited Li	ability Company is
Principal Office Address:	Mailing Address:	
HZ Marie circle Crawfordville, FL 32327	Same	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own I business entity with an active Florida registration.)	ered Office, & Registered Agent's Registered Agent. You must designate an indiv	s Signature: idual or another
The name and the Florida street address of	the registered agent are:	TAL OS
Reed Brown	/ Jame	SEP 14
ML Marie circle Florida street	et address (P.O. Box NOT acceptable)	
- Crawford ille City, St	FL 32327 tate, and Zip	N 2: 59

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)

"MGR" = Manage "MGRM" = Mana		Name and Address:	
MGRM	_	Reed Brown	
		42 Marie ciale	
		connection ville, FL. 32312	
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Use attachment if LE V: Effective da fective date is list or 90 days after the REQUIRED SIGNATION.	ate, if other than the otted, the date must ne date of filing.)	date of filing: (OP be specific and cannot be more than five	TION
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LE V: Effective da fective date is list or 90 days after th REQUIRED SIGN	nte, if other than the otted, the date must ne date of filing.) NATURE: Signature of a member In accordance with sections	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution are an affirmation under the penalties of perjury	Ţ TION
LE V: Effective da fective date is list or 90 days after th REQUIRED SIGN	nte, if other than the otted, the date must he date of filing.) NATURE: In accordance with section of this document constitution that the facts stated her	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution are an affirmation under the penalties of perjury	Ť TION
LE V: Effective da fective date is list or 90 days after th REQUIRED SIGN	nte, if other than the otted, the date must he date of filing.) NATURE: In accordance with section of this document constitution that the facts stated her	or an authorized representative of a member. Ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)	TION