DO5000095744

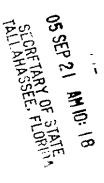
(Requestor's Name)		
(Address)		
(Address)		
(iddisso)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Dusiness Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



000059768240

09/21/05-01022--015 **125.00



J. Shivers SEP 29 2005

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SAND Castle Developer'S 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:	
James DeFranco	
(Name of Person)	
SAND CASTIE DEVELOPERS LLC	<u>-</u>
(Firm/Company)	
304 Buchanav#4 (Address)	
CAPE CANAVERA/ F/32920 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Jim DeFranco at (32) 591-5497 (Name of Person) (Area Code & Daytime Telephone Number)	OS SEP
Enclosed is a check for the following amount:	ZASSEI
\$125.00 Filing Fee \$\ \text{Certificate of Status} \] \$130.00 Filing Fee & \text{Certified Copy} \\ (additional copy is enclosed) \$\text{Certified Copy} \\ (additional copy is enclosed)	MID: 18
	7

Mailing Address
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: Sand Castle Developers LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
(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:
304 Buchanan Av Same
CAPE CANAVERAL FI 3220
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:
James DeFranco
James DeFranco Name 304 Buchanan Av #4 Florida street address (P.O. Box NOT acceptable) Cape Canaveralfl 32920 City, State, and Zip
Cape Canaveralfl 32920 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

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:
MGR	JAMES DEFRANCO 304 BUCHANAN AVE #4 CAPE CANAVERAL FL 32920
MGRM	SAL DEFRANCO 966 Floyd TER UNION NJ 07083
<u> </u>	
(Use attachment if necessary) ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)	date of filing:
REQUIRED SIGNATURE:	er or an authorized representative of a member.
(In accordance with sec	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury
	ped or printed name of signee
Filing Fees: \$125.00 Filing Fee for Articles of Orga of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	