

LOS000096145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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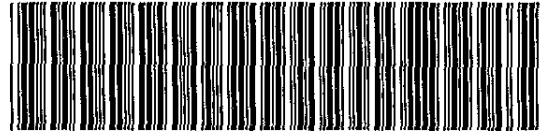
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers SEP 30 2005

LAW OFFICES  
**MICHAEL A. RIDER**

A PROFESSIONAL ASSOCIATION



13 NORTH OAK AVENUE  
LAKE PLACID, FLORIDA 33852

E-MAIL: mariderpa1@earthlink.net

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September 21, 2005

Registration Section  
Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

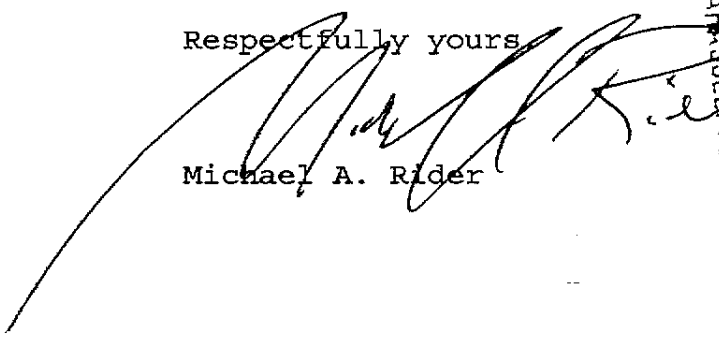
RE: 3/4 Time, LLC

Gentlemen:

Enclosed please find Articles of Organization for 3/4 Time, LLC for filing, along with my check in the amount of \$160.00. Please return a certified copy of the Articles and a Certificate of Status at your earliest convenience.

Please contact me with any questions.

Respectfully yours

  
Michael A. Rider

MAR/ama  
Encl.

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**ARTICLES OF ORGANIZATION  
OF  
3/4 TIME, LLC**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida, does hereby set forth the following:

**ARTICLE I - NAME OF COMPANY**

The name of the limited liability company (the "Company") is 3/4 Time, LLC.

**ARTICLE II - PRINCIPAL OFFICE AND MAILING ADDRESS**

The principal office, the mailing address and the street address of this Company is 1025 County Road 17 North, Lake Placid, Florida 33852.

**ARTICLE III - DURATION**

This company shall exist perpetually.

**ARTICLE IV - MANAGEMENT**

The Company shall be a manager-managed Company. The Manager shall be:

Mason G. Smoak  
1025 County Road 17 North  
Lake Placid, Florida 33852

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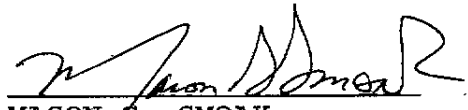
**ARTICLE V - PURPOSE**

The purpose for which the Company is organized is to engage in any and all businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a Company organized and existing by virtue of such laws.

**ARTICLE VI - REGISTERED AGENT AND REGISTERED OFFICE**

The name and Florida street address of the initial registered agent and registered office for the Company is Mason G. Smoak, 1025 County Road 17 North, Lake Placid, Florida 33852.

IN WITNESS WHEREOF, the undersigned Manager of the Company has made and subscribed these Articles of Organization this 22nd day of September, 2005.

  
MASON G. SMOAK  
Manager of Company  
1025 County Road 17 North  
Lake Placid, Florida 33852

**ACCEPTANCE BY REGISTERED AGENT**

Having been named as the registered agent for the abovementioned Company at the place designated in the foregoing Articles of Organization, I hereby accept such designation and agree to act in such capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties as registered agent. I am familiar with, and accept the duties and obligations of Section 608.415 of the Florida Statutes.

Signature: \_\_\_\_\_

Mason G. Smoak  
Registered Agent

Date: \_\_\_\_\_

9/22/05

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