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COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: AMERICAN REAL ESTATE NETWORK, 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 P. FLEMING (Name of Person) (Firm/Company) 536 WHISPERING WIND BEND For further information concerning this matter, please call: (Name of Person) Enclosed is a check for the following amount: ✓ \$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
AMERICAN REAL ESTATE NETWO (Must end with the words "Limited Liability Company, "Limited	
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2277 SUNNY HILLS BLVD CHIPLEY, FL 32428	2277 SUNNY HILLS BLVD CHIPLEY, FL 32428
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
JAMES P. FLEMING Name	
536 WHISPERING V Florida street addr	VIND BEND ress (P.O. Box <u>NOT</u> acceptable)
LEHIGH ACRES, 33936 City, State, ar	

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

"MGR" = Man "MGRM" = M	ager anaging Member	Name and Address:
MGR		JAMES P. FLEMING 536 WHISPERING WIND BEND LEHIGH ACRES, FL 33936
(Use attachmer	nt if necessary)	
(Coo attacimici	iit ii iicoossary)	
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LE V: Effective date is days after the	ve date, if other than the listed, the date must date of filing.) SIGNATURE: Signature of a ment of this document co	t be specific and cannot be more than five business da nber or an authorized representative of a member. section 608.408(3), Florida Statues, the execution constitutes an affirmation under the penalties of perjury and herein are true.)
LE V: Effective date is days after the	Signature of a men (In accordance with of this document co that the facts state JAMES P. FL	nber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution set in a affirmation under the penalties of perjury and herein are true.