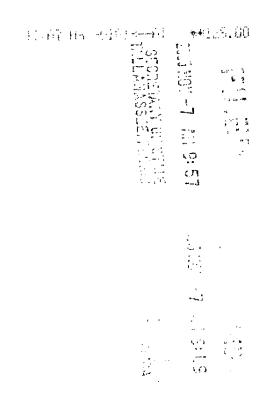
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(Requestor's Name)	
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PICK-UP WAIT MA	1L
(Business Entity Name)	
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COVER LETTER

TO: Registration So Division of Co			
SUBJECT: And	Name of Limite	d Liability Company)	······································
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	condence concerning this matte	er to the following:	
Andre	w Harvell	Name of Person)	
	(Name of Person)	
Andrew	Horvell LLC	Firm/Company)	
560	03 Hay 393		
	,	(Address)	
Crestu	Jan , F1 3253	(Address) 9 /State and Zip Code)	
	concerning this matter, please	call:	
(Name	of Person)	at () (Area Code & Daytime Te	elephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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 Gin C

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Andrew Harvell LLC	
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:
5623 Hay 393 Crestriew Pl 32539	5623 Hay 383 Crestiles, Fl 32539
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re	egistered agent are:
Andrew Harvell Name	<u></u>
5623 Huy 393 Florida street addi	ress (P.O. Box NOT acceptable)
Show 393 Florida street addit Crestvino City, State, at	FL 32539
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited its certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S.

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Manager The name and address of each Manager	ng Member(s): or Managing Member is as follows:	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Andrew Harvell 5623 Huy 393 Corstvian, Fl 32539	
·		
(U. attachment if passages)		
(Use attachment if necessary) NOTE: An additional article must be	added if an effective date is request	ed.
REQUIRED SIGNATURE:		
Signature of a member of	r an authorized representative of a member	<u>.</u>
of this document constitute that the facts stated here		,
	or printed name of signee	12 SEC 2005
Filing Fees: \$125.00 Filing Fee for Articles of Organize of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	ation and Designation	MASSELFI MAS