105000/16433

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(Red	questor's Name)		
(Add	ress)		_
(Add	dress)		_
(City	//State/Zip/Phon	e #}	_
PICK-UP	MAIT	MAIL	
(Bus	siness Entity Nar	ne)	_
(Do	cument Number)		_
Certified Copies	Certificate	s of Status	
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Special Instructions to I	filing Officer:		
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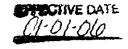
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SECRETARY OF SIAIL DIVISION OF CORPORATION





COVER LETTER

To: Registration Section Division of Corporations		
SUBJECT: Wright Architecture, 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:		
Marshall J. Wright		
(Name of Person)		TO THE REAL REAL STREET
		-
(Firm/Company)	30.5	Visc
383 Calle Escada	3	ON CONTRACT
(Address)	<u>+</u>	F CC
Santa Rosa Beach, FL 32459	-	
(City/State and Zip Code)	33	RATIO
,	<u> </u>),
For further information concerning this matter, please call:		
Marshall J. Wright <u>at (</u> 850) 585-4875		
(Name of Person) (Area Code & Daytime Telephone Number)		• •
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\sum \$130.00 Filing Fee & \$\sum \$155.00 Filing Fee & \$\sum \$160.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed)	:	<u> ===</u> s.
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:

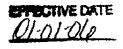
The name of the Limited Liability Company is:

(Must end with the v	words "Limited Liability Company, "L	imited Company" or their abbreviation "LLC," or "L.	.C.,")	
ARTICLE II -	. Address:			
		e principal office of the Limited Liability	y Company	is:
-	••• • • • • • • • • • • • • • • • • •	- FF	, - 1 3	
Principal Offic	ce Address:	Mailing Address:		
383 Calle Esca	da	_383 Calle Escada		==.
Santa Rosa Bea	ach, FL 32459	Santa Rosa Beach, FL 32459		
(The Limited Liabil)	ity Company cannot serve as its own R	ered Office, & Registered Agent's Sign egistered Agent. You must designate an individual or	another	
(The Limited Liabili business entity wit		egistered Agent. You must designate an individual or		SECRETAR) DIVISION OF C
(The Limited Liabili business entity wit	ity Company cannot serve as its own R h an active Florida registration.) the Florida street address of the Marshall J. Wright	egistered Agent. You must designate an individual or	another 2005 DEC I	CRE TAR
(The Limited Liabili business entity wit	ity Company cannot serve as its own R h an active Florida registration.) the Florida street address of the Marshall J. Wright	egistered Agent. You must designate an individual or he registered agent are:	another	SECRETARY OF STA DIVISION OF CORPORATION
(The Limited Liabili business entity wit	ity Company cannot serve as its own R h an active Florida registration.) the Florida street address of the Marshall J. Wright Na 383 Calle Escada	egistered Agent. You must designate an individual or he registered agent are:	another 2005 DEC I AM 8: I	CRE TAR
(The Limited Liabili business entity wit	ity Company cannot serve as its own R h an active Florida registration.) the Florida street address of the Marshall J. Wright Na 383 Calle Escada	egistered Agent. You must designate an individual or the registered agent are:	another 2005 DEC I	CRE TAR

Naumall (M/Unit
Registered Agent's Signature (REQUIRED)

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..

(CONTINUED)
Page 1 of 2



<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGR	Marshall J. Wright	
	383 Calle Escada	
	Santa Rosa Beach, FL 32459	- • • • • • • • • • • • • • • • • • • •
MGRM	Karen M. Wright	0
	383 Calle Escada	NVIS IVIS
	Santa Rosa Beach, FL 32459	- 5 Sicon
	•	- CRETA
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(Use attachment if necessary)		
FICLE V: Effective date, if other than t n effective date is listed, the date must	the date of filing: <u>JU, U, 2006</u> . (OP) t be specific and cannot be more than five busine	TIONAL) ess days prior
TICLE V: Effective date, if other than to the effective date is listed, the date must	the date of filing: <u>JUN, OI, 2000</u> . (OPT t be specific and cannot be more than five busine	,
FICLE V: Effective date, if other than to an effective date is listed, the date must be r 90 days after the date of filing.)	the date of filing: <u>Jun, DI, 2006</u> . (OPT t be specific and cannot be more than five busine Mawait	,
FICLE V: Effective date, if other than to meffective date is listed, the date must r 90 days after the date of filing.) REQUIRED SIGNATURE:	the date of filing: Jun, O1, 2000. (OP) t be specific and cannot be more than five busine Ugwight mber or an authorized representative of a member.	,
TICLE V: Effective date, if other than to an effective date is listed, the date must or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a men (In accordance with of this document co	ll G Whight	,
TICLE V: Effective date, if other than to an effective date is listed, the date must or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a men (In accordance with of this document co	a section 608.408(3), Florida Statutes, the execution sentitutes an affirmation under the penalties of perjury ed herein are true.)	,
TICLE V: Effective date, if other than to an effective date is listed, the date must or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a men (In accordance with of this document conthat the facts state)	nber or an authorized representative of a member. a section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury ed herein are true.)	,
TICLE V: Effective date, if other than to an effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a men (In accordance with of this document contact the facts state)	a section 608.408(3), Florida Statutes, the execution sentitutes an affirmation under the penalties of perjury ed herein are true.)	,

ARTICLE IV- Manager(s) or Managing Member(s):

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)