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(Requestor's Name)	
(Address)	600062141
(Address) (City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	12/15/05010300
(Business Entity Name) 05 - 2035 (Document Number)	
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**125.00

COVER LETTER

TO: Registration S Division of Co				
SUBJECT: GARR	ISON DEVELOPMEN	IT, LLC		
	(Name of Limite	ed Liability Compa	any)	
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing	g.	
Please return all corresp	pondence concerning this matte	er to the following	3-	
Joe Garris	on	<u>.</u>		
	(Name of Person)		
Garrison D	evelopment, LLC	ż		
	((Firm/Company)		
Post Office	e Box 510			
		(Address)		
Dundee, F	Florida 33838	_		
	(City	/State and Zip Code	i)	
For further information	concerning this matter, please	call:		
Joe Garrison		at (863	557-041	9
(Name	of Person)			elephone Number)
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy i	y	\$160.00 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	Registration of Clifton Book 2661 Exe	eurier Address on Section of Corporation wilding coutive Center	ns Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

GARRISON DEVELOPMENT .)] ()		
	any, "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 Co	ompany is:
Principal Office Address:	Mailing Address:	
2100 Dundee Road, Suite 108	Post Office Box 510	
Winter Haven, Florida 33884	Dundee, Florida 33838	
		hercit
business entity with an active Florida registration.) The name and the Florida street address Joe Garrison 2100 Dundee Road	s of the registered agent are:	PILED DEC 15 PH 3: 31
The name and the Florida street address Joe Garrison 2100 Dundee Road	s of the registered agent are:	PEC 15 PM 3:
The name and the Florida street address Joe Garrison 2100 Dundee Road	Name d, Suite 108	PEC 15 PM 3:
The name and the Florida street address Joe Garrison 2100 Dundee Road Florida Winter Haven	Name d, Suite 108 a street address (P.O. Box NOT acceptable)	PEC 15 PM 3:

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

MGRM Joe Garrison 2100 Dundee Road, Suite 108 Winter Haven, Florida 33884 MGRM Daphne M. Garrison 2100 Dundee Road, Suite 108 Winter Haven, Florida 33884 Winter Haven, Florida 33884 CUse attachment if necessary) LE V: Effective date, if other than the date of filing: (OPTIO) fective date is listed, the date must be specific and cannot be more than five business of days after the date of filing.) REQUIRED SIGNATURE:	<u> Title:</u>	Name and Address:
Joe Garrison 2100 Dundee Road, Suite 108 Winter Haven, Florida 33884 MGRM Daphne M. Garrison 2100 Dundee Road, Suite 108 Winter Haven, Florida 33884 Winter Haven, Florida 33884 (Use attachment if necessary) LE V: Effective date, if other than the date of filing:	'MGR" = Manager	
2100 Dundee Road, Suite 108 Winter Haven, Florida 33884 Daphne M. Garrison 2100 Dundee Road, Suite 108 Winter Haven, Florida 33884 Winter Haven, Florida 33884 (Use attachment if necessary) LE V: Effective date, if other than the date of filing:	'MGRM" = Managing Mer	nber
Winter Haven, Florida 33884 Daphne M. Garrison 2100 Dundee Road, Suite 108 Winter Haven, Florida 33884 (Use attachment if necessary) LE V: Effective date, if other than the date of filing:	MGRM	Joe Garrison
Daphne M. Garrison 2100 Dundee Road, Suite 108 Winter Haven, Florida 33884 (Use attachment if necessary) LE V: Effective date, if other than the date of filing:		2100 Dundee Road, Suite 108
2100 Dundee Road, Suite 108 Winter Haven, Florida 33884 (Use attachment if necessary) LE V: Effective date, if other than the date of filing:		Winter Haven, Florida 33884
Use attachment if necessary) LE V: Effective date, if other than the date of filing:	MGRM	Daphne M. Garrison
(Use attachment if necessary) LE V: Effective date, if other than the date of filing:		
LE V: Effective date, if other than the date of filing:		Winter Haven, Florida 33884
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fective date is listed, the date must be specific and cannot be more than five business of days after the date of filing.) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member.		
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	fective date is listed, the date days after the date of filing REQUIRED SIGNATUR Signature (In accordance)	te must be specific and cannot be more than five business desp.) E:

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee