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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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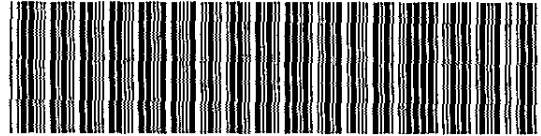
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# CHARLES HALL & ASSOCIATES, PA

Professional Tax & Accounting Services

Phone: 904-829-6533

P.O. Box 4050, St. Augustine, Florida 32085-4050

Fax: 904-829-9470

Charles E. Hall, PhD, EA, CTP,  
Former IRS Revenue Officer

Lisa A. Rangnow  
Tax Preparer

January 2, 2006

Secretary of State  
Division of Corporations  
Post office Box 6327  
Tallahassee, Florida 32314

Re: BLACK BOX HOUSE, LLC

Dear Sir or Madam:

Please find enclosed herewith an original and one copy of the Articles of Organization of the above-named Limited Liability Company. Please file these Articles at your earliest date and furnish me with an acknowledgement of its filings via a certified copy and Certificate of Status to be mailed to our offices.


You will note that Article IV of the Articles of Organization sets out the name and address of the Registered Agent of the Limited Liability Company.

Enclosed is my trust fund check payable to the Secretary of State - Division of Corporations in the amount of \$ 160.00 which is in payment of the charges for your filing fee, designation of registered agent, certified copy and certificate of status.

Should you have any questions regarding this document, please feel free to contact me at any time.

Thanking you in advance for your courtesy and prompt recording of this LLC, I remain,

Sincerely,



Charles E. Hall, PhD  
Enrolled Agent  
Certified Tax Professional

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION  
OF  
BLACK BOX HOUSE, LLC**

The undersigned, a natural person or persons competent to contract, for the purposes of forming a Florida Limited Liability Company pursuant to Chapter 608, Florida Statutes do hereby make, acknowledge and file in the Office of the Secretary of State of Florida the following Articles of Organization.

**ARTICLE I NAME AND ADDRESS:**

The name of the Limited Liability Company is BLACK BOX HOUSE, LLC and its address is 1 Ponce De Leon Avenue, St. Augustine, Florida 32080.

**ARTICLE II DURATION:**

This Limited Liability Company shall have perpetual existence commencing on the date of execution and acknowledgement of these Articles.

**ARTICLE III PURPOSE:**

The general purposes for which the Company is organized are the following:

- A. To engage in and transact business and for which LLC's may be organized pursuant to Florida Statutes.
- B. To do such other things as are incidental to the purposes of the LLC or necessary or desirable for the purposes of transacting any and all lawful business.

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**ARTICLE IV INITIAL REGISTERED OFFICE AND AGENT:**

The street address of the initial registered office of the Corporation is 77 Almeria Street, St. Augustine, Florida 32084 with a mailing address of Post Office Box 4050, St. Augustine, Florida 32085-4050, and the name of its initial registered agent at that address is Charles E. Hall.

*Handwritten:* 1-2-06

**ARTICLE V MANAGERS OR MANAGING MEMBERS:**

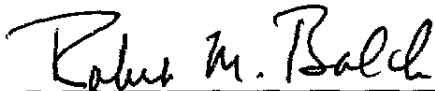
The name and address of each Manager or Managing Member is as follows:

Robert M. Balch	Robert K. Balch
504 Riverside Drive	1 Ponce De Leon Ave
Newport News, VA 23606	St. Augustine, Fl 32080
Managing Member	Member

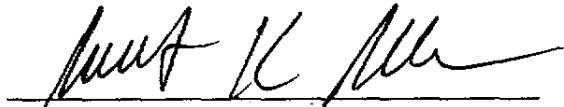
**ARTICLE VI EFFECTIVE DATE OF ORGANIZATION:**

The effective date of the Limited Liability Company shall be January 2, 2006.

IN WITNESS WHEREOF, the undersigned incorporator (s) have executed these Articles of Organization this the 2nd day of January, 2006.



Robert M. Balch

  
Robert K. Balch

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TALLAHASSEE, FLORIDA

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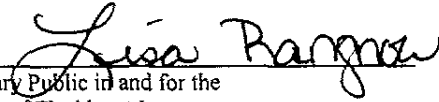
STATE OF FLORIDA

SS:

COUNTY OF ST JOHNS

Before me, the undersigned authority, personally appeared Robert M. Balch, to me known to be the person who executed the foregoing Articles of Organization, and he acknowledged to and before me that he executed such instrument.

WITNESS my hand and seal this the 2nd day of January, 2006.

  
Notary Public in and for the  
State of Florida, at Large



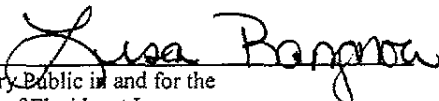
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**CERTIFICATE OF DESIGNATION  
OF  
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provision of Section 608, Florida Statutes, the undersigned Florida Limited Liability Company, organized under the Laws of the State of Florida, submits the following statement in designation of the Registered Office and Registered Agent in the State of Florida.

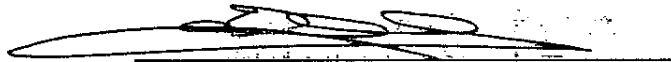
1. The name of the Limited Liability Company is:

**BLACK BOX HOUSE, LLC.**

2. The name and address of the Registered Agent and Office is:

**Charles E. Hall  
77 Almeria Street, Post Office Box 4050  
St. Augustine, Florida 32084**

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, the individual herein identified hereby accepts the appointment as Registered Agent and agrees to act in this capacity. The individual further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and will accept the obligations of its position as Registered Agent.



Charles E. Hall  
Registered Agent

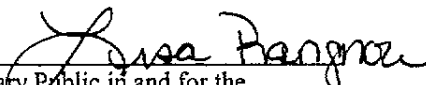
STATE OF FLORIDA

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