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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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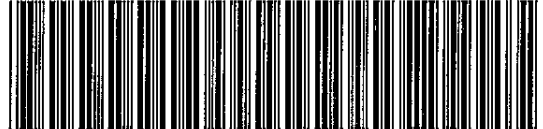
(Business Entity Name)

(Document Number)

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06 JAN 13 PM 1:32
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06 JAN 13 PM 1:29
SECRETARY OF STATE
DIVISION OF CORPORATE REGISTRATION
TALLAHASSEE, FLORIDA

MEMORANDUM

TO: Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FROM: Shane T. Gager
537 East Park Avenue
Tallahassee, FL 32301

SUBJECT: BLUE SABRE CAPITAL LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shane T. Gager
537 East Park Avenue
Tallahassee, FL 32301

For further information concerning this matter, please call:

Shane T. Gager at (850) 539-8242

Enclosed is a check for the following amount:

\$130.00 Filing Fee & Certificate Status

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
BLUE SABRE CAPITAL, LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is:

BLUE SABRE CAPITAL, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

537 East Park Avenue
Tallahassee, FL 32301

Mailing Address:

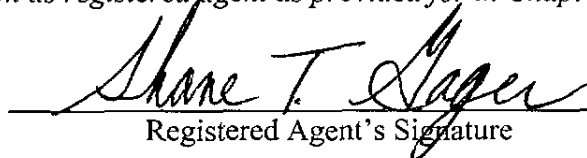
537 East Park Avenue
Tallahassee, FL 32301

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Shane T. Gager
537 East Park Avenue
Tallahassee, FL 32301

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

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

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

Title:

Name and Address:

Managing Member

Shane T. Gager
537 East Park Avenue
Tallahassee, FL 32301


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE V: Effective date, if other than the date of filing: January 1, 2006.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SHANE T. GAGER
Shane T. Gager

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TALLAHASSEE, FLORIDA