104000008138

(Red	questor's Name)	
(Ade	dress)	
(Add	dress)	
Cit	y/State/Zip/Phone	<u> </u>
(Cit)	motates Espir Hosse	= 11 /
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	
	Filling Onlogi.	LC
<u> </u>		

Office Use Only



000063413740

01/17/06--01024--014 **160.00

OF JAN 17 PM 1:36

M. HODGE

COVER LETTER

Division of Co			
SUBJECT:	Ceylon Developi	ment Group LLC	
	(Name of Limited	d Liability Company)	
The enclosed Articles of	of Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	oondence concerning this matte	er to the following:	
August J.	. Brescia		
	0	Name of Person)	
	(Firm/Company)	
1152 Su	nset Lane		
		(Address)	
Gulf Bre	eze, FL 32563		
	(City	/State and Zip Code)	
For further information	concerning this matter, please	call:	
August J. Bres	scia	at (850) 934-705	54
(Name	e of Person)	(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)	\$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	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:
Ceylon Develop	oment Group LLC
(Must end with the words "Limited Liability Company, "Lin	
ARTICLE II - Address:	
	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1157 Seabreeze Lane	3749 D Gulf Breeze PKW Ste 303
Gulf Breeze FL 32563	Gulf Breeze FL 32563
	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are:
Nan	ne T
1152 Sunset Ln	
Florida street	address (P.O. Box NOT acceptable)
Gulf Breeze FL 32563	FL SS - U
City, State	e, and Zip
liability company at the place designated in registered agent and agree to act in this capac	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and

(CONTINUED)
Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manage	er -	Name and Address:	
"MGRM" = Mana			
MGRM		Jeffrey Gadboys	·
		1157 Seabreeze Lane	
		Gulf Breeze FL 32563	
MGRM		August J Brescia	
		1152 Sunset Ln	
		Gulf Breeze FL 32563	
MGRM		Charles Williamson	
<u> </u>	-	1157 Seabreeze Lane	
		Gulf Breeze FL 32563	<u>.</u>
			
(Use attachment i ARTICLE V: Effective of (If an effective date is list to or 90 days after the da	late, if other than the dated	te of filing: Decific and cannot be more than five b	(OPTIONAL) usiness days prioi
REQUIRED SIC	\wedge		
	Signature of a member of	r an authorized representative of a member.	
	(In accordance with section of this document constitute that the facts stated here	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)	
	_	August J. Brescia	
	Typed	or printed name of signee	

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)