

FROM: CLARION VENTURES, INC.

FAX NO: (623) 465-8640

Jan. 18 2006 06:28:11 P2

**Florida Department of State**  
**Division of Corporations**  
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**To:**  
 Division of Corporations  
 Fax Number : (850) 205-0383

**From:**  
 Account Name : CLARION VENTURES, INC.  
 Account Number : I20030000026  
 Phone : (623) 465-8636  
 Fax Number : (623) 465-8640

**FLORIDA/FOREIGN LIMITED LIABILITY CO**

**Eagle Tran LLC**

Certificate of Status	0
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3p

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Eagle Tran LLC**ARTICLE II - Address:**

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

**Principal Office Address:**195 South Central AveBartow Fl, 33830**Mailing Address:**195 South Central AveBartow Fl, 33830**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

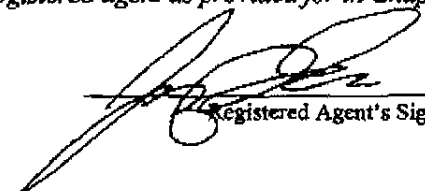
Jerry Pahl

Name

1870 E. Oakwood LoopFlorida street address (P.O. Box **NOT** acceptable)Bartow,FLORIDA 33830

City, State, and Zip

*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, Florida Statutes..*

  
\_\_\_\_\_  
Registered Agent's Signature

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Jerry Pahl

1870 E Oakwood Loop

Bartow Fl, 33830

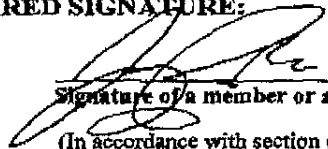
MGRM

Jamie Hines, Sr.

715 Soledad Ave.

Bartow Fl, 33830

(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested**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.)

JERRY R. PAHL

Typed or printed name of signee

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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