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	SECRETARY OF STATE TALLAHASSEE, FLORID, r's Name)			
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TO:	Registration Se Division of Co			2.6	06 JAN 21	4 A 10: 33		
SUBJE	ECT:	AL SCHMIDLE, (Name of Lin		SE TAL	CRETAR'	OF STATE		
The en	closed Articles o	f Organization and fee(s) and	e submitte	ed for filing.				
Please	return all corresp	ondence concerning this m	atter to the	e following:				
		AL SCHMIDLE						
	(Name of Person)							
	(Firm/Company)							
	827 PARADISE WAY							
	(Address)							
		SARASOTA, FLOR	IDA 34	4242				
		((City/State a	nd Zip Code)				
For fur	ther information	concerning this matter, plea	ase cail:					
	CATH	EY SCOTT	at (941)_	650-	8782 lephone Number)		
	(Name	of Person)		(Area Code &	Daytime Te	lephone Number)		
Enclos	sed is a check fo	or the following amount:						
□ \$125	5.00 Filing Fee	\$130.00 Filing Fee Certificate of Status	Cert	\$155.00 Filir tified Copy tional copy is e		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Mailing Address		Street/Cour	rier Address	Ē		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF ORGANIZATION OF AL SCHMIDLE, L.L.C.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the Limited Liability Company is:

AL SCHMIDLE, L.L.C.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 827 Paradise Way, Sarasota, Florida 34242.

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND RESIDENT AGENT'S SIGNATURE

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

Al Schmidle 827 Paradise Way Sarasota, Florida 34242

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.

AL SCHMIDLE

ARTICLE IV - MANAGEMENT

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The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company. The name and address of the Managing Melnber of the limited liability company is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Al Schmidle 827 Paradise Way Sarasota, Florida 34242

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.

Dated at Sarasota, Florida this 19th day of January, 2006.

AL SCHMIDLE, L.L.C.

Al Schmidle, Managing Member