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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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SECNAL ASSET FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporation					
SUBJECT: The Pelican LLC (Name of Limited Liability Company)					
The enclosed Articles of Or	ganization and fee(s) are su	abmitted for filing.			
Please return all correspondence concerning this matter to the following:					
John L. Ashbaugh II					
(Name of Person)					
	(I	Firm/Company)			
6560 Dock Ave					
		(Address)			
Cocoa, FL 32927					
Cocoa, FL 32927 (City/State and Zip Code)					
For further information concerning this matter, please call:					
John L. Ashbaugh II at ( 334 ) 538-148  (Name of Person) (Area Code & Daytime Telep			480 elephone Number)		
Enclosed is a check for the	ne following amount:				
	] \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
I I	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center	ons Circle		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:	-	
The Pelican LLC (Must end with the words "Limited Liability Company, "Limit	ed Company" or their abbreviation "LLC," or "L	
ARTICLE II - Address:	uincinal office of the Limited Liebility	v Company is:
The mailing address and street address of the pe	nncipal office of the Elithed Liability	y Company is.
Principal Office Address:	Mailing Address:	
6560 Dock Ave	6560 Dock Ave	· ·
Cocoa, FL	Cocoa, FL	
32927	32927	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the interest and in the Florida street address of the interest address.	stered Agent. You must designate an individual or	06 FEB -3 PH
John L. Ashbaugh II		SSS: 3
Name		THE PE
6560 Dock Ave		PH 12: 20 SEE, FLORID
Florida street ad	dress (P.O. Box NOT acceptable)	DA DA
Cocoa	FL 32927	
City, State.	and Zin	

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR John L. Ashbaugh II 6560 Dock Ave Cocoa, FL 32927 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: February 1, 2006 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a speaber 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

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)

John L. Ashbaugh II

that the facts stated herein are true.)

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

Typed or printed name of signee