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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

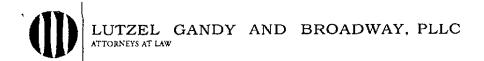




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M. HODGES



Please reply to Lake Norman

March 7, 2006

Florida Department of State Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Re: Hearing Aids Today, LLC Articles of Organization

Dear Sir/Madam:

Enclosed please find an original of the Articles of Organization for the above referenced company, together with a check in the amount of \$125.00 for filing fee, respectively. Please process and return the letter of acknowledgement to this office.

Thank you for your anticipated cooperation.

Very truly yours,

Richard J. Lutzel, Esq.

RJL/wrg Enclosure

COVER LETTER

TO: Registration Se Division of Co	ection rporations		
subject: Hearing	ng Aids Today, LLC	d Liability Company)	
	(Name of Limited	a Liability Company)	
The enclosed Articles of	f Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
Richard J	. Lutzel, Esq.		
	C	Name of Person)	
Lutzel, Ga	andy & Broadway		
	(Firm/Company)	
542 Willi	amson Road, Su	iite A	
		(Address)	
Mooresv	ille, North Carol		
	(City/	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Wanda Gordon		at (704) 799-35	70
(Name 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 Address 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:		
Hearing Aids Today, LLC (Must end with the words "Limited Liability Company, "Li	d Community of the state of the	4I C 12	
(Must end with the words "Limited Liability Company, "Li	mited Company" or their abbreviation "LLC,"	or "L.C.,")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Lia	bility Company is:	
Principal Office Address:	Mailing Address:		
975 Del Mar Drive	975 Del Mar Drive		
The Villages, Florida 32159	The Villages, Florida 32159		
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Robusiness entity with an active Florida registration.) The name and the Florida street address of the Judy Sparkman Na 975 Del Mar Drive Florida street	egistered Agent. You must designate an individ		
The Villages,	FL 32159 te, and Zip		
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as registered Agent's Signature.	in this certificate, I hereby accept the acity. I further agree to comply with a performance of my duties, and I am registered agent as provided for in Charles	e appointment as the provisions of all 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" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Trey Knight 975 Del Mar Drive The Villages, Florida 32159
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the control of the date is listed, the date must to or 90 days after the date of filing.)	he date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a mem	aber of an authorized representative of a member.

Richard J. Lutzel, Esquire
Typed or pri

that the facts stated herein are true.)

Typed or printed name of signee

(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)