## L06000027506

(Re	questor's Name)
(Ad	dress)
(Ad	dress)
(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	siness Entity Name)
(Do	cument Number)
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Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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SECRETARY OF STATE

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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

V. McFodyer	~ Xxc.	
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		Art of Inc. File
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		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature	<del></del>	Fictitious Owner Search
D-9		Vehicle Search
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Requested by:	01-1	UCC 1 or 3 File
	3/15/06 11:06	UCC 11 Search
Name	Date Time	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liability Company is:		
V.McFadyeNLLC # 3		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address: Mailing Address:		
300 Southard St POBOX 1693 SUITE 106 Key WEST FL Key WEST FL 33040 33040		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:		
The name and the Florida street address of the registered agent are:  Victoria MSFadyev  Name		
Florida street address (P.O. Box NOT acceptable)  Kay Wat Fl 33040  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, F.S.

Registered Agent's Signature

(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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Victoria McFadyer	V MEFRAGIEN 300 SOMMARASH SKION Key WEITE 73040
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	Ŀ
	4.4

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.)

## 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)