2006 MAR 23 P 3: 49 SECRETARY OF STATE
TALLAHASSEE, FLORIDA (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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Christine Lusk
6287Midnight Pass #404 L ED
Sarasota, Florida 34242
941-312-9837
7006 MAR 23 P 3: 49

SECRETARY OF STATE TALLAHASSEE, FLORIDA

March 20, 2006

To Whom It May Concern:

Enclosed are the Articles of Organization For Florida Limited Liability Company and a check in the amount of \$125.00 for filing fees.

Thank you for your attention to this matter.

Sincerely,

Christine Lusk

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LI 2006 MAR 23 P 3: 49 **ARTICLE I - Name:** LUSK Retail Consulting AFERDIARY OF STATE The name of the Limited Liability Company is: **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: 6297 Midnight Pass #404 Sarasota, F1. 34242 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Christine Lusic 6287 Midnight Pass Florida street address (P.O. Box NOT acceptable) Sara sota FL 34242 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 (An additional article must be added if an effective date is requested)

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

Christine L. Lusk Typed or printed name of signee

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

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)