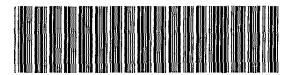
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(Re	questor's Name)	
(Ad	dress)	
<u> </u>	dress)	
(Au	ulessj	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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DIVINITATION CONFURATION

J. BRYAN MAR 3 1 2006

COVER LETTER

	istration Se sion of Co					
SUBJECT:	Asset	Auctions LLC (Name of Limited	d Liability Comp	any)		
		f Organization and fee(s) are so		_		
	_	h L. Fontana, III	Name of Person)	<u></u>	<u> </u>	
Ass	et Auc	tions LLC D/B/A	Fop Dollar	Auction	eers	
PO	Box 1		Pilito Company)			DISTRICT TO STATE OF THE STATE
Nar	oles, F	FL 34106	(Address)			AHASSE
			State and Zip Cod	e)		E, FLORIDA
Joseph I		ana, III of Person)	at (239 (Area Coo) 293-93 le & Daytime T	07 elephone Number	ि छ _.
_		or the following amount:	_			
\$125.00 Fi	iling Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 F Certified Cop (additional copy	-	S160.00 1 Certificate o Certified Co (additional copy	f Status & opy
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton I 2661 Ex	ourier Addression Section of Corporation Suilding ecutive Center see, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	is:	
Asset Auctions LLC	是 美州	
(Must end with the words "Limited Liability Company, "Li	imited Company" or their abbreviation "LLC," or "L.C."	
A DETICAL TO A LA	E S S S E	
ARTICLE II - Address:	a main aimed a 60 ar a Called Limite of Lie Little Company	
The maining address and street address of the	e principal office of the Limited Liability Company is	
Principal Office Address:	imited Company" or their abbreviation "LLC," or "L.C." o	
275 Yucca Road, Naples, FL 34102	PO Box 1409, Naples, FL 34106	
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another	
, ,	landa da d	
The name and the Florida street address of the	ne registered agent are:	
Joseph L. Fontana, III	03/22/06)_
Na	ime	
275 Yucca Road		
Florida street	address (P.O. Box <u>NOT</u> acceptable)	
Naples	FL 34102	
City, Stat	ste, and Zip	
Having been named as registered agent and	to accept service of process for the above stated limited	

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

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:
MGRM	Joseph L. Fontana, III 275 Yucca Road Naples, FL 34102
MGRM	Angela M. DiMundo 610 Murex Drive Naples, FL 34102
(Use attachment if necessary)	9.9
ARTICLE V: Effective date, if other than the d (If an effective date is listed, the date must be to or 90 days after the date of filing.)	ನನಿ, ate of filing: March 17th, 2006 . (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	1 (2)

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.)

Joseph L. Foutava.

yped or printed name of signee

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)