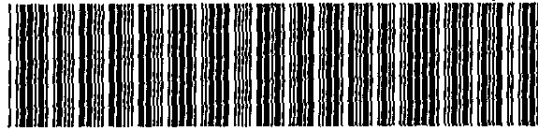


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eff date/rec. 4/24



800071301258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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MAIL

04/24/06--01011--023 **125.00

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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W06-19743

EFFECTIVE DATE
4-24-06



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 27, 2006

STEPHANIE GIBSON
RSGE ENTERPRISES, LLC
1217 DUNDEE LANE
LYNN HAVEN, FL 32444

SUBJECT: RSGE ENTERPRISES, LLC
Ref. Number: W06000019763

We have received your document for RSGE ENTERPRISES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on April 24, 2006. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 706A00029263

2006 APR 24 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RSGE Enterprises, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephanie Gibson
(Name of Person)

RSGE Enterprises, LLC
(Firm/Company)

1217 Dundee Lane
(Address)

Lynn Haven, FL 32444
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Stephanie Gibson at (850) 258-6398
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RSGE Enterprises, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1217 Dundee Lane
Lynn Haven, FL 32444

Mailing Address:

1217 Dundee Lane
Lynn Haven, FL 32444

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or other business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Stephanie Gibson
Name

1217 Dundee Lane
Florida street address (P.O. Box **NOT** acceptable)

Lynn Haven FL 32444
City, State, and Zip

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TALLAHASSEE, FLORIDA

FILED

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..

Stephanie Gibson
Registered Agent's Signature (REQUIRED)

EFFECTIVE DATE
4-24-06

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:

MGRM

Robert Gibson

1217 Dundee Lane

Lynn Haven, FL 32444

MGRM

Gorden Littleford

975 Finrod Way

Casselberry, FL 32707

MGRM

Elaine Littleford

975 Finrod Way

Casselberry, FL 32707

MGRM

Stephanie Gibson

1217 Dundee Lane


Lynn Haven, FL 32444

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 04/04/2006 4/24/06 (256)
(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.)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REQUIRED SIGNATURE:



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.)

Stephanie Gibson

Typed 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)