

LOG 00000 49731

(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:

Office Use Only

515
[Signature]



800073877418

STATE OF FLORIDA - DEPARTMENT OF REVENUE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 MAY -4 PM 12: 06

FILED

Law Offices of
C. J. Keel, Jr., P.A.
4045 Henderson Boulevard
Tampa, Florida 33629
(813) 282-3858
FAX (813) 289-5272

C.J. Keel, Jr.
Jeff Keel
Attorneys at Law

April 28, 2006

Florida Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32301

Re: Articles of Organization for Florida Limited Liability Co.
FUNS, LLC

Dear Gentlemen:

Please find original and true copy of Articles of Organization for Florida Limited Liability Company, to wit: FUNS, LLC

I have enclosed my check in the sum of \$155.00 for the following:

1.	Filing Fee	\$100.00
2.	Designation of Reg. Agent	25.00
3.	Certified Copy of Articles	<u>30.00</u>
	TOTAL	\$155.00

Please send the certified copy to my attention.

Very truly yours,


C.J. Keel, Jr.

CJK/ame
Encl/s

FILED
06 MAY -11 PM 12:06
STATE OF FLORIDA
TALLAHASSEE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is

FUNS, LLC

ARTICLE II - Address:

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

2807 W. Leila Avenue, Tampa, Florida 33611

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

The name of the Florida street address of the registered agent is:

Scott Estes

Name

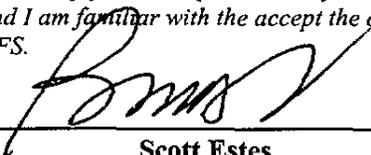
2807 W. Leila Avenue

Florida street address (P.O. Box NOT acceptable)

Tampa, Florida 33611

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 relation to the proper and complete performance of my duties, and I am familiar with the accept the obligations of my position as registered agent as provided for in chapter 608, FS.



Scott Estes

Registered Agent's Signature

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 MAY -4 PM 12:06

FILED

ARTICLE IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.



Frank J. Schittino
Signature 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.)

FILED
06 MAY -1, PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA