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(Re	questor's Name)			
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(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 25, 2006

ROBERT JAYSON ARSENAULT 4198 96TH AVE NORTH PINELLAS PARK, FL 33782-3901

SUBJECT: OPTION3 REALTY LLC Ref. Number: W06000024305

We have received your document for OPTION3 REALTY LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Only one person can be listed as registered agent.,

Limited liability companies are either member-managed or manager-managed - not both. Member-managed companies are managed by the members of the limited liability company. Manager-managed companies are managed by non-members. Please amend your document to reflect either the limited liability company is member-managed or manager-managed. If the limited liability company is member-managed, list the names and addresses of the members who will manage the company and identify them solely as managing members of the non-members who will manage the company and identify them solely as managers. You cannot list both managers and managing members.

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) 245-6020.

Tammi Cline Document Specialist

Letter Number: 506A00036805

COVER LETTER

TO: Registration So Division of Co					
SUBJECT: Option3 Realty L LC (Name of Limited Liability Company)					
	(Name of Limited	Liability Company)			
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all corresp	ondence concerning this matte	r to the following:			
Robert Ja	ayson Arsenault				
ROBORTOC		Name of Person)			
***************************************	(Firm/Company)			
/108 OR	th Ave North				
+130 301	AT AVE NOTH	(Address)			
5: "	D El 00700	•			
<u> Pinellas</u>	Park, FL 33782		7.00		
	(City	/State and Zip Code)	SECRETARY OF STATE ALLAHASSEE, FLORID OF STATE O	-77	
For further information	concerning this matter, please	cail:	HA HA	Faces of the last	
5		707 550.05	SSEE SSEE		
Robert Arsena	iuit e of Person)	at (727) 553-95 (Area Code & Daytime T	elenhone Number)	<u> </u>	
(14ane	, of I cisony	(Alea Code & Dayline 1	OR TE	Э	
Enclosed is a check fe	or the following amount:		Dr.	>	
\$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	Street/Courier Address Registration Section Division of Corporation Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Option3 Realty LLC	
(Must end with the words "Limited Liabil	lity 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:	Mailing Address:
4198 96th Ave North	4198 96th Ave North
Pinellas Park, FL 33782-3901	Pinellas Park, FL 33782-3901
(The Limited Liability Company cannot s business entity with an active Florida reg	gent, Registered Office, & Registered Agent's Signature serve as its own Registered Agent. You must designate an individual or mother registration.) et address of the registered agent are: Arsenault Name

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

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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:
4	MER/MGRM	Robert J Arsenault 2837 1st Street NE St. Petersburg FL 33704
		TALL.
	(Use attachment if necessary)	JUN 12 PH
(If an	CLE V: Effective date, if other than the date effective date is listed, the date must be spoon days after the date of filing.)	te of filing: (OFFIENAE) pecific and cannot be more than five business day prior

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.)

Robert J Arsenault

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)