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SECRETARY OF STATE SECRETARY OF STATE

APPROVED

June 19, 2006 COVER LETTER

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		COVER	RLETTER	
10:	Registration Se Division of Co			
SUBJI	ect: Gla	adius, LLC		
30.501		(Name of Limite	d Liability Company)	
The en	closed Articles o	f Organization and fee(s) are so	ubmitted for filing.	
		ondence concerning this matte	•	
	_	. Sasso, Esquire	C	
		•	AD	
		Į:	Name of Person)	
	Michael C	. Sasso, P.A.	-	
	(Firm Company)			
	1031 W. N	Morse Blvd., Suite 260	•	· · · ·
			(Address)	
	Winter Par	rk, Florida 32789		
		(Ciry.	/State and Zip Code)	
For fiu	ther information	concerning this matter, please	call:	
Barb	ara J. Shold,	Paralegal	at (61
	(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclos	sed is a check fo	or the following amount:		
\$125	.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	X \$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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ūs

Glenn Christopher Rathbun

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	ורו	F	Τ.	_ N a	me:

The name of the Limited Liability Company is:

Gladius, 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:

incipal Office Address:	Mailing Address:	
4550 Orange Blvd.	4550 Orange Blvd.	
Sanford, Florida 32771	Sanford, Florida 32771	

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 another business entity with an active Florida registration.)

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

Michael C. Sasso,	Esquire	
"	Name	
1031 W. Morse Bl	vd., Suite 260	
Florida str	eet address (P.O.	Box NOT acceptable)
Winter Park	FL	32789
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 (REQUIRED)
Michael C. Sasso, Esquire

(CONTINUED)
Page 1 of 2

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SECRETARY OF STATE
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APROVED

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:
MGR	Glenn Christopher Rathbun 4550 Orange Boulevard Sanford, Florida 32771
·	
(Use attachment if necessary)	
	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	Chatthe

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.)

Glenn Christopher Rathbun

Typed or printed name of signee

Filing Fees:

Ċ,

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)