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DIVISION OF CORPORATIONS

2006 JUN 26 PM 2: 20

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COVER LETTER

TO: Registration Section Division of Corpo					
SUBJECT: JOSEP	h Leigh Invest (Name of Limited	ments, LCC l Liability Company)		_	
•					
The enclosed Articles of O	rganization and fee(s) are su	bmitted for filing.			
Please return all correspond	dence concerning this matter	r to the following:			
Charle	s J. Mitchel	lJn:			_
	(1)	Name of Person)			_
tinst	Capitan Pro	Name of Person) Penty Group Farm/Company)	Juc.	200	iylo S
1	~ ()		2006 JUN 26	SIGN
120	E. Coloniac	DK.		₹	유류
6 (Λ	(Address)		_	
OKLA	wds, FC 3	52801		PH 2	OPAI ATS
	wds, FC 3	State and Zip Code)		20	1.05. 1.05. 1.05.
For further information con	cerning this matter, please of	call:			
Charles J	Mutchell In Person)	at ((Area Code & Daytime Te	1-0209 lephone Number)	-	
Enclosed is a check for the					
\$125.00 Filing Fee	3130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of Sta Certified Copy (additional copy is en	tus &	
1 1	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	s		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "Limited Co	inpany of their abbreviation LLC, or L.C.,)
ARTICLE II - Address: The mailing address and street address of the princi	pal office of the Limited Liability Company is:
Principal Office Address:	lailing Address:
DUANDO, FL 32801	ONIMAO, FC 32801
•	Agent. You must designate an individual or another SECRETARY OF SIMILED ACCEPTABLE PH 2: ACCEPTABLE (P.O. Box NOT acceptable) 3288

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:

"MGRM" = Managing Member MGRM MGRM	Charles J. Mitchell In. 165 Spring Chase Ciacle
MGRM	Panela W. Mitchell 165 Spring Chase Circle Panela W. Mitchell 165 Spring Chase Circ Altamete Springs, FC 32714
(Use attachment if necessary)	2006 JUN 26
ICLE V: Effective date, if other than the	e date of filing: (OPT ONA) e specific and cannot be more than five business days

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.)

hanles J. Mitchell Ja

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)