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DIVISION OF CORPORATION

B. Tadlock JUL 10 2006

## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJE	CCT: Back	up Express, LLC (Name of Limited	1 Liability Company)	<del>.</del>
The en	closed Articles of	f Organization and fee(s) are so	abmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
	Stephen			
		a	Name of Person)	
		(	Firm/Company)	
	12480 PI	easant Green Way		
		,	(Address)	
	Boynton	Beach, FL 33437	· · · · · · · · · · · · · · · · · · ·	
		(City	(State and Zip Code)	
For fur	ther information	concerning this matter, please	call:	
Step	hen Fritts		at (561 ) 733-291	
	(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclos	sed is a check fo	or the following amount:		
<b>✓</b> \$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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	ons

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company i	s:	
Backup Express, LLC		
(Must end with the words "Limited Liability Company, "Lin	nited 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 Compa	my is:
Principal Office Address:	Mailing Address:	
12480 Pleasant Green Way	12480 Pleasant Green Way	
Boynton Beach, FL 39437	Boynton Beach, FL 33437	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registration.)	ed Office, & Registered Agent's Signature: gistored Agent. You must designate an individual or enother	
The name and the Florida street address of the	registered agent are:	
D. David Keller, Esq.		90

Namo One Financial Plaza, 100 Southeast Third Avenue, 9th Floor Florida street address (P.O. Box NOT acceptable)

33394 Pt. Lauderdale 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 (REQUIR

(CONTINUED) Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Transfer Transfer & Marie 44	•
MGRM	Stephen Fritts
	12480 Pleasant Green Way
	Boynton Beach, FL 33437
MGRM	Bruce Edwards
	2260 SW 139th Terrace
	Devje, FL 33390
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Use attachment if necessary)	
EV: Effective date, if other the fective date is listed, the date in	an the date of filing: (OPTION ust be specific and cannot be more than five business de
Use attachment if necessary)  LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.)  REOUTRED SIGNATURE:	an the date of filing: (OPTION ust be specific and cannot be more than five business date of filing:
E V: Effective date, if other the ective date is listed, the date in days after the date of filing.)  REQUIRED SIGNATURE:	an the date of filing:

Eiling 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)