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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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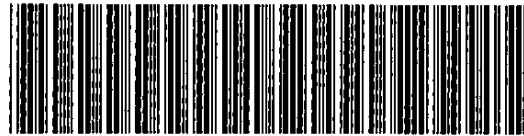
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

W. Outigan JUL 19 2006

BARON & MOORE, P.A.
ATTORNEYS AT LAW

MICHAEL L. MOORE

ARTHUR BARON *†
FLORIDA BOARD CERTIFIED
CIVIL TRIAL LAWYER

* ALSO ADMITTED IN MICHIGAN
† OF COUNSEL

640 N. HILLSIDE AVENUE
ORLANDO, FLORIDA 32803
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WWW.BARONANDMOORE.COM
PLEASE REPLY TO ORLANDO OFFICE

MICHIGAN OFFICE
1101 11TH AVENUE
SUITE 4
MENOMINEE, MI 49858
OFFICE: (906) 863-3600
FAX: (906) 863-3609

July 14, 2006

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314


Re: STRATEGY U, LLC
Articles of Organization

Dear Sir/Madam:

Please find enclosed two (2) original executed Articles of Organization for STRATEGY U, LLC for filing. Also enclosed is a check in the amount of \$160.00 as payment of the filing fee.

Please return a certified copy of the Articles to the address above, and feel free to contact me if you have any questions.

Sincerely,



Michael L. Moore

MLM:mkr
Enclosures: as stated
cc: Ms. Erin Bell

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

The name of the Limited Liability Company is:

STRATEGY U, LLC

ARTICLE II – Address:

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

Principal Office Address

184 SE Eyerly Avenue
Port Saint Lucie, Fl. 34983-2500

Mailing Address

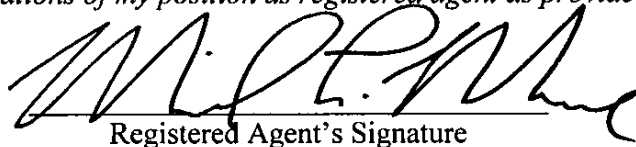
184 SE Eyerly Avenue
Port Saint Lucie, Fl. 34983-2500

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature

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

Michael L. Moore, Esquire
640 North Hillside Avenue
Orlando, Florida 32803

Having been named as registered agent and to accept service of process for 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, Florida Statutes.



Registered Agent's Signature

ARTICLE IV – Manager(s) or Managing Member(s)

The name and address of each Manager or Managing Member is as follows:

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Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Erin Bell

184 SE Eyerly Avenue

Port Saint Lucie, FL 34983-2500

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

ERIN BELL

Typed or printed name of signee

Filing fees enclosed

\$100.00 Filing Fee for Articles of Organization

\$25.00 Designation of Registered Agent

\$30.00 Certified Copy

\$ 5.00 Certificate of Status

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