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PICK-UP - WAIT MAIL
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Certified Copies Certificates of Status
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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## Progressive Alliance, L.L.C.

2737 N. "E" Street Pensacola, FL 32501 (850) 438-4882

July 25, 2006

Florida Department of State Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Filing Articles of Organization for Progressive Alliance, L.L.C.

Dear Registration Section,

Please register the Progressive Alliance, L.L.C> with the attached Articles of Organization. Enclosed is a check for \$130.00 for the filing fee of \$125.00 and the certificate status fee of \$5.00. Also, please find the Acceptance of Registered Agent. If you have any questions, please contact me at (850) 968-2741.

Sincerely,

Jerry McIntosh, President

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 2, 2006

JERRY MCINTOSH 2737 N E STREET PENSACOLA, FL 32501

SUBJECT: PROGRESSIVE ALLIANCE, L.L.C.

Ref. Number: W06000034099

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

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 106A00048469

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

PROGRESSIVE ALLIANCE (Must end with the words "Dimited Liability Company, "Limited Company" or their abbreviation "I	C LLC," or "L.C.,")	•	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited	l Liability Com	pany is	<b>;:</b>
Principal Office Address:  Mailing Address:			
2737 N. "E" S+ PENSACOLA, FL 32501			
ARTICLE III - Registered Agent, Registered Office, & Registered Age (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an in business entity with an active Florida registration.)			
The name and the Florida street address of the registered agent are:  TO hany W. BLACKME  Name  2737 NAR H. (E') St  Florida street address (P.O. Box NOT acceptable)  PENSAC LAFL 3250/  City, State, and Zip	ASSEE.	06 AUG 31 AM 8: 09	FLED

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 Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
	***************************************
<del></del>	SECRE SECRE
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(Use attachment if necessary)	SEE: AM
ICLE V: Effective date, if other than the	
effective date is listed, the date must 90 days after the date of filing.)	be specific and cannot be more than five business days p
REQUIRED SIGNATURE:	
Signature of a mem	ber or an authorized representative of a member.
(In accordance with	section 608.408(3), Florida Statutes, the execution astitutes an affirmation under the penalties of perjury
To b	NNYW. BLackmon

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)