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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: Florida Sunshine, LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alan Russell		
	(Name of Person)	
Corporate Support Services of Nev	vada, Inc.	2006 SECK TALLA
4535 W. Sahara Ave., Suite 200	(Firm/Company)	SEP 18 HASSEE,
Las Vegas, NV 89102	(Address)	D 1: 5L
	(City/State and Zip Code)	

For further information concerning this matter, please call:

Alan Russell a ( 202 ) 533 - 4030
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

x \$125.00 Filing Fee

\$130.00 Filing Fee & Certificate of Status

\$155.00 Filing Fee & Certified Copy

Certified Copy (additional copy is enclosed)

Certifi

□ \$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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICIES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compar	ny is:
Florida Sunshine, 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 t	the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1131 Ronds Pointe Dr W	1131 Ronds Pointe Dr W
1101 Rollds Folike Di VV	AS 2
Tallahassee, FL 32312	Tallahassee, FL 32312
	AA SE
	S 20
ARTICLE III - Registered Agent, Regist	tered Office, & Registered Agent's Signature: vn Registered Agent. You must designate an individual or
another	The state of the s
business entity with an active Florida registration.)	RATE TO THE REPORT OF THE PARTY
The name and the Florida street address of	f the registered agent are: $D^{rri}$ 5
Lauren Phinney	
	Name
1131 Ronds Pointe Dr. W	
Florida str	reet address (P.O. Box NOT acceptable)
Tallahassee	FL 32312
City,	State, and Zip
II to I am a decidence of the second second	and to accept remine of manager for the chove stated limited

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

"MGR = Mana "MGRM" = Ma	nger nnaging Member	Name and Address:	
MGRM		Dalphin Properties, LP	
		4535 W. Sahara Ave., Suite 200	
		Las Vegas, NV 89102	
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