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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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2004 SEP 27 P 2: 28

# **COVER LETTER**

TO: Registration So Division of Co				
SUBJECT: Bodhi	Tree Outsourcing S			
	(Name of Limite	d Liability Company)		
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
lan A. My	ers		·	
-	(	Name of Person)		
Bodhi Tre	e Outsourcing Se			· · · · · · · · · · · · · · · · · · ·
	(	Firm/Company)	<b></b> 4	
201 Mon	tgomery Avenue		ALL IBB	7
		(Address)	第 男	-
Sarasota	, Florida 34243		27 N503	
<del></del>	(City	/State and Zip Code)	7.0	J
For further information	concerning this matter, please	call:	2: 28	
Kelli D. Tharpe	)	at (941 ) 360-150 (Area Code & Daytime To	36	
(Name	e of Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a check for	or the following amount:			
\$125,00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of Statu Certified Copy (additional copy is encl	s &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:			
Bodhi Treë Outsourcing Services, LLC			
Must end with the words "Limited Liability Company, "Limite	d Company" or their abbreviation "LLC," or "L.C.,")		
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
201 Montgomery Avenue Sarasota, Florida 34243	6904 14th Street West #133 Bradenton, FL 34207		
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an individual or another		
The name and the Florida street address of the r	egistered agent are:		
lan A. Myers			
Name	T S		
201 Montgomery Avenu			
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)		
Sarasota, Florida 34243 City, State, a	F <u>L</u> nd 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 (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  MGRM	Member	Ian A. Myers		
MGRM				
		201 Montgomery Avenue		
		Sarasota, Florida 34243		
MGRM _		Kelli D. Tharpe		
		201 Montgomery Avenue		
		Sarasota, Florida 34243		•
MGRM		Frank DeJohn		
		201 Montgomery Avenue		
		Sarasota, Florida 34243	4 第	
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(11			28	
(Use attachment if nece	essary)		<b>F</b> 30	
"LEV: Effective date if	Cother than the de	ate of filing:	(OPTIO	NATA
0 days after the date of f				u-J∞ k
CLE V: Effective date, if	other than the da	ate of filing:specific and cannot be more the	(OPTIO an five business	

Frank DeJohn

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)