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(Address)

(City/State/Zip/Phone #)

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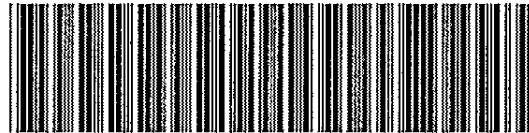
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DIVISION OF CORPORATIONS  
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Joining Hearts, Hands and Minds, 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:

Ophelia McDaniels

(Name of Person)

Joining Hearts, Hands and Minds, LLC

(Firm/Company)

1814 SW Hickock Terrace

(Address)

Port St. Lucie, Florida 34953

(City/State and Zip Code)

For further information concerning this matter, please call:

Ophelia McDaniels

(Name of Person)

at ( 772 ) 336-3320

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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

**Joining Hearts Hands and Minds, LLC**  
a Florida Limited Liability Company

**ARTICLE I - NAME**

The name of the Limited Liability Company shall be **Joining Hearts Hands and Minds, LLC**.

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is: 1814 SW Hickock Terrace, Port St. Lucie, Florida 34953

**Article III - Registered Office and Agent**

The name of the registered agent of the limited liability company shall be  
**Pacific Registered Agents, Inc.**  
92 Sadberry Road  
Quincy, Florida 32351

**ARTICLE IV - MANAGERS AND MANAGING MEMBERS**

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

Managing Member, Norman McDaniels  
Manager, Ophelia McDaniels

The address of each Manager and Managing Member is:  
1814 SW Hickock Terrace  
Port St. Lucie, Florida 34953

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## **ARTICLE XXII - BURDEN AND BENEFIT**

These Articles are binding upon and shall inure to the benefit of the parties hereto and their respective heirs, guardians, executors, administrators, personal and legal representatives, and successors and to the assigns of the parties hereto to the extent, but only to the extent, the same is provided for in accordance with, and permitted by, the provisions of these Articles.


## **ARTICLE XXIII - NOTICES**

Except as otherwise provided in these Articles, any notice, consent or other communication required or permitted hereunder shall be in writing and shall be addressed to its principal place of business specified in Article 2, in the case of the manager, to its office at the location specified in Article 4, and, in the case of any member, to its address set forth below its signature as specified on or to such other address or person as any of the foregoing parties shall furnish to the other parties in writing; and any such communication so addressed shall be deemed to have been given when delivered by hand or on the earlier of actual receipt and three (3) business days after being sent by registered or certified mail, postage prepaid, return receipt requested, or one (1) business day after being sent by overnight courier, telegram, or cable or on actual receipt after being sent by any means not specified herein.

## **ARTICLE XXIV - GOVERNING LAW**

It is the intention of the parties hereto that these Articles shall be governed by and construed and enforced in accordance with the laws of the State of Florida.

Having been named as Registered Agent to accept service of process for the above stated Corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

  
\_\_\_\_\_  
Registered Agent  
Charles F. Mathias, President of  
Pacific Registered Agents, Inc.

July 20, 2006

Date

  
\_\_\_\_\_  
Ophelia McDaniels, Manager  
Joining Hearts and Hands, LLC

July 17, 2006

Date

(In accordance with section 608.408 (3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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