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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Three Friends LLC

6840 NE 225th St.
Melrose, FL 32666

LAWRENCE J. WURN, Registered Agent

Phone (352) 475-1267
Fax (352) 475-5019

October 5, 2006

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: Three Friends LLC

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

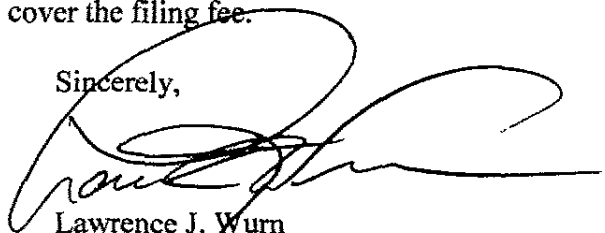
Please return all correspondence concerning this matter to the following:

Lawrence J. Wurn
Three Friends LLC
6840 NE 225th Street
Melrose, FL 32666

For further information concerning this matter, please call Lawrence J. Wurn at 352-475-1267.

Enclosed is a check in the amount of \$125.00 to cover the filing fee.

Sincerely,



Lawrence J. Wurn
Registered Agent

LJW/dl
Enclosures

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

**ARTICLE I
Name**

The name of the Limited Liability Company is Three Friends LLC.

**ARTICLE II
Address**

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

Principal Office Address:

6840 NE 225th Street
Melrose, FL 32666

Mailing Address:

6840 NE 225th Street
Melrose, FL 32666

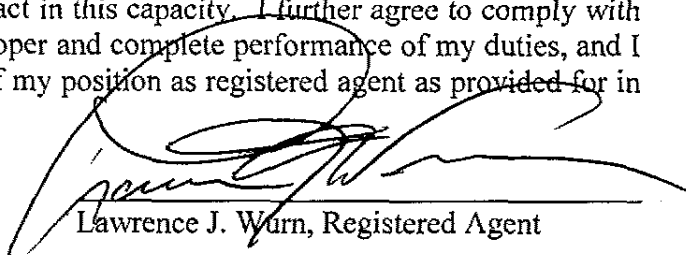
**ARTICLE III
Registered Agent, Registered Office, & Registered Agent's Signature**

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

Lawrence J. Wurn
6840 NE 225th Street
Melrose, FL 32666

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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.


Lawrence J. Wurn, Registered Agent

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

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

Title:

Name and Address:

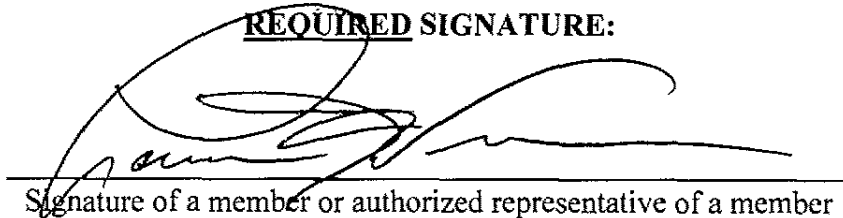
Managing Member

Larry Cheshire
4609-B3 NW 6th Street
Gainesville, FL 32609-4123

Managing Member

Alexander Reece
6921 NW 22nd Street
Gainesville, FL 32653-1231

REQUIRED SIGNATURE:



Signature of a member or authorized representative of a member

(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.)

Lawrence J. Wurn

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)

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