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PICK-UP	WAIT	MAIL	
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SECRETARY OF STATE
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1011-14137 CA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LIQUIDONE LLC (Name of Limited Liability Company)	
(Figure of Difficulty)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
RICHARD A GRIFFIN (Name of Person)	
(Firm/Company)	
13567 FOREST LAKE DR.	
LARGO, FL 33771	77
(City/State and Zip Code)	
For further information concerning this matter, please call: Richard A. Griffin at (727) 224-2504 557 (Name of Person) (Area Code & Daytime Telephone Number)	
RICHARD A. GRIFFIN at 727 224-2504 55 7 (Area Code & Daytime Telephone Number)	المسوا
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \$\bigcup \\$155.00 Filing Fee & \$\bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration Section Registration Section Division of Comparting	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LIQUID ONE 11C

(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 the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
13567 FOREST LAKE DR LARGO, FL 33771	13567 FOREST LAKE DR LARGO, FL 33771
LARGO City, State, and Having been named as registered agent and to a	red Agent. You must designate an individual of another agent are: FFIN AKE DR. ess (P.O. Box NOT acceptable) FL 3377

Registered Agent's Signature (REQUIRED)

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.

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGRM	RICHARO A. GRIFFIN 13567 FOREST LAKE DR. LARGO, FL 33771			
MGRM	M. WAYNE GRIFFIN 6302 NIKKI LANE TAMPA, FL 33625			
				,
(Use attachment if necessary)				
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)				ior
REQUIRED SIGNATURE:				
Signature of a membe	r or an authorized representative of a member.			
(In accordance with sec	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury	SECR	2007 F	가신 (* 301 다 번
RICHARD A	ped or printed name of signee	HAS		CANADA SA
Filing Fees:		RY OF S	7 PM	
\$125.00 Filing Fee for Articles of Organ of Registered Agent	nization and Designation	ORIC	12:	******

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

Page 2 of 2