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FILED

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: INTEGRA DESIGN 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:	
LAURA L. RZEPKA (Name of Person)	
(Name of Person)	
INTEGRA DESIGN LLC	
(Firm/Company)	
3537 MINEOLA DRIVE (Address) FLOR	
(Address)	
SARASOTA FL 34239 FF GOLD FROM THE SARASOTA FROM THE SARASOT	
(City/State and Zip Code)	FILED
(Address) SARASOTA FL 34239 (City/State and Zip Code) For further information concerning this matter, please call: LAURA L. RZEPKA at 941 704 8007	<u> </u>
LAURA L. RZEPKA at 941 FOY 8007 (Area Code & Daytime Telephone Number)	>
(Name of Person) (Area Code & Dayunic Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\text{Certified Copy (additional copy is enclosed)}} \text{\$\text{Certified Copy (additional copy is enclosed)}}	
Mailing Address Street/Courier Address	

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

INTEGRA DESIGN LLC

ARTICLE I - Name:

The name of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
Suire B	3537 MINEOLA DR SARASOTA FL 34239
SOUTH SCHOOL A VENUE	SARASOTA FL 34239
SARASOVA FL 34239	
ARTICLE III - Registered Agent. Regist	tered Office, & Registered Agent's Signature:
	Registered Agent. You must designate an individual or another
	يتسترين
,	the registered agent are:
The name and the Florida street address of	the registered agent are:
The name and the Florida street address of LAURA	
The name and the Florida street address of LAURA N	Name
The name and the Florida street address of $\frac{LAURA}{N}$	Name

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..

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

LAURA RIEPKA (MGRM) 3537 MINEOCA DA

SARASOTA FL 34239

ROLAND BANDINEL (MGRM) 3537 MINEOLA DA

SARASOTA FL 34239

MIECZYSLAW RASMUS (MGRM) 2916 WOODCREST DR

SARASOTA FL 34239

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: D2/08/2007 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an 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.)

ROLAND BANDINEC
Typed or printed name of signee

Filing Fees:

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

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

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