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(Re	equestor's Name)	ı
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL.
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(Do	cument Number	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only

EFFECTIVE DATE 3/07



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SECRETARY OF STATE



COVER LETTER

Division of Co			
SUBJECT:	AC Venture (Name of Limited	d Liability Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	oondence concerning this matte	er to the following:	
	Terry B	Name of Person)	
	(Firm/Company)	
69	19 W Brow	ward Blvd (Address)	#219
PI	antation,	(Address) FL 3331	A AFIAA
For further information	(City concerning this matter, please	/State and Zip Code)	F PH 2: 39 Y OF STATE SEE FLORID
erry	Burnam e of Person)	at (954) 471 (Area Code & Daytime T	-10138 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 Fee, Certificate of Status & Certified Copy (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 Corporatio Clifton Building 2661 Executive Center	ns

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
OAC Ventus (Must end with the words "Limited Liability Company, "Limited	
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:
6455 Cypress Rd Plantation, FL 33317	6919 W Broward Blvd #219 Plantation, FL 33317
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register 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 re	J. S.
Terry Burn	
6455 Cypri Florida street addr	ress (P.O. Box NOT acceptable)
Plantation City, State, ar	FL 33317 nd Zip
	ccept service of process for the above stated limited ais certificate, I hereby accept the appointment as

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)

EFFECTIVE DATE 3-1-07

(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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Terry Burnam 6455 Cypress Rd Plantation, FL 33317
MGR	Rick Nichols 4467 Dawes St #1F San Diego, CA 92109
MGR	Jeff Hosek 26229 N bath LN Peoria, AZ 85383
(Use attachment if necessary)	

(Usc attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: $\underbrace{\text{March 1}, 2007}$. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:	e 0:	
Dey Hook 388	FEB	
Signature of a member or an authorized representative of a member $\widetilde{\gamma_1} \approx 0$	· ·	(1
(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.) JEFF HOSEK Typed or printed name of signee	PH 2:39	

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)