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SECKETARY OF STATE DIVISION OF CORPOSALIONS

## **COVER LETTER**

Division of Cor				
SUBJECT: Project	o3, LLC			
soboler.	(Name of Limite	d Liability Company)	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing.		
Please return all correspo	ondence concerning this matte	er to the following:		
Erik Peterso	on			
	(	Name of Person)		
Project o3, l	LC			
	(	Firm/Company)		_
26447 Dov	erstone St.			<u> </u>
		(Address)		SIA Als
Bonita Spri	ngs, Fl 34135		TARK	
	(City	/State and Zip Code)		- COR
For further information c	oncerning this matter, please	call:	<u> </u>	RETARY OF STATE NOT CORFORATIONS
Erik Peterson	•	at ( 239 ) 248.47	78	38 Swort
(Name	of Person)	(Area Code & Daytime	Telephone Number)	
Enclosed is a check for	r the following amount:			
<b>✓</b> \$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 Add Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	ame:		
	Limited Liability Compa	any is:	
Project o3, LLC			
(Must end with the wo	ords "Limited Liability Company	, "Limited Company" or their abbreviation "LLC," or "L	C.,")
ARTICLE II - A		the principal office of the Limited Liabilit	y Company is:
Principal Office	e Address:	<b>Mailing Address:</b>	
26447 Doverstone S	<b>t.</b>	same	
Bonita Springs, Fl 34	135		_ <del>_</del>
(The Limited Liability business entity with	Company cannot serve as its ow an active Florida registration.)	istered Office, & Registered Agent's Signary Registered Agent. You must designate an individual of	
	Erik Peterson	of the registered agent are:	DIVIS 07
		Name	SECRETORY OF MAR 2
	Erik Peterson  26447 Doverstone St.	Name	SECRETARY DIVISION OF CO 07 MAR 21
	Erik Peterson  26447 Doverstone St.	Name	음곡
	26447 Doverstone St. Florida st Bonita Springs, Fl 34135	Name  treet address (P.O. Box <u>NOT</u> acceptable)  FL	음곡
	26447 Doverstone St. Florida st Bonita Springs, Fl 34135	Name  Ireet address (P.O. Box <u>NOT</u> acceptable)	SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORATION OF MAR 21 AM IO: 38

(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:

"MGR" = Manage "MGRM" = Mana		Name and Address:	
MGRM		Erik Peterson	
	_	26447 Doverstone St.	_
		Bonita Springs, Fl 34135	<del>-</del>
<del></del>	_		_
	_		
			_ 
	_		7 MAR
	_		- - - 2
(Use attachment if	necessary)		AM IO:
	d, the date must be	date of filing: 04/01/07 . (OPTIC specific and cannot be more than five business	·
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REQUIRED SIG	NATURE:		
REQUIRED SIG	20 as		
REQUIRED SIG	20 as	ar an authorized representative of a member.	
REQUIRED SIG	Signature of a member	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury	
REQUIRED SIG	Signature of a member (In accordance with sect of this document constitu	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury	

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)