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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Compater Means, 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:	
Ramay W. Means (Name of Person)	
(omputer Means, UC) (Firm/Company)	
110 Cape Cicle	
Change City Beach Alarda 32413 (City/State and Zip Code)	
	i Er
For further information concerning this matter, please call:	20.00
Mudu L- Stwart at (850) 585-4846 (Name of Person) (Area Code & Daytime Telephone Number)	~7
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigcup \text{\$130.00 Filing Fee & Certificate of Status}\$ Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Mailing Address Registration Section Street/Courier Address Registration Section	

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:

	1C
(Must end with the words "Limited Liability Company, "Limited	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
110 Cape Cincle Parnama City Great, Fl. 32413	110 Cape Circle Homama atz. Beach. Fl. 30413
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the I	registered agent are: 7 HAR 26 26 OF 60
310 West Case Florida street ad Agusta Plusa Bot	dress (P.O. Box NOT acceptable) All 99 ANT OF STATE OF S
City, State, Having heen named as registered agent and to	

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)

(CONTINUED)
Page 1 of 2

<u>Fitle:</u> 'MGR'' = Manager 'MGRIM" = Managing N	Name and Address: Member	
MGR	Randy W. Means 110 Cape, Circle Panama City Beach, FL 33459	_
MGRM	Angela L. Cobb 5322 Manzonita Dr. Panama City, FL 30404	<u> </u>
		07 MAR 26
,		26 AM
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(Use attachment if nece	other than the date of filing: (OP	
LE V: Effective date, if	other than the date of filing: (OP: e date must be specific and cannot be more than five busine ling.)	ς ΓΙΟΝΑ
LE V: Effective date, if fective date is listed, the days after the date of f	other than the date of filing: (OP: e date must be specific and cannot be more than five busine ling.)	ς ΓΙΟΝΑ
LE V: Effective date, if fective date is listed, the days after the date of f	other than the date of filing: (OP: e date must be specific and cannot be more than five busine ling.)	ς ΓΙΟΝΑ
LE V: Effective date, if ffective date is listed, th days after the date of f REQUIRED SIGNAT Signa (In according to this	e date must be specific and cannot be more than five busing ling.) URE: ordance with section 608.408(3), Florida Statutes, the execution document constitutes an affirmation under the penalties of perjury the facts stated herein are true.)	ς ΓΙΟΝΑ
LE V: Effective date, if ffective date is listed, th days after the date of f REQUIRED SIGNAT Signa (In according to this	e date must be specific and cannot be more than five busing ling.) URE: ordance with section 608.408(3), Florida Statutes, the execution document constitutes an affirmation under the penalties of perjury	ς ΓΙΟΝΑ

Federal Tax ID / EIN

This is your provisional Employer Identification Number:

20-5848922

Today's Date is: November 08, 2006 GMT

You will receive a confirmation letter in U.S. mail within fifteen days. The letter will also contain useful tax information for your business or organization.

If you have input any of the information on your application in error, please wait seven days and contact the EIN Toll Free area at 1-800-829-4933, Monday - Friday, 7:30am - 5:30pm. If you do not want to call, please make corrections on the letter you receive confirming your EIN and return it to the IRS.

If you are going to complete other on-line applications that require your Employer Identification Number(EIN) you can copy it by performing the following steps:

- 1) Use your mouse to highlight your EIN (blue number on top of page) by moving your pointer on top of the number.
- 2) Press the Ctrl key at the same time pressing the C key.

Once you copy your EIN you can paste it in the appropriate place by pressing the Ctrl key at the same time pressing the V key.

You may click on the buttons below for different print options or to fill out another Form SS-4.

Review and Brint Form SS-43-20 (43-4Fill Out Another Form SS-43-4M)

Click <u>here</u> to return to the Internet Employer Identification Number landing (start) page.

SECRETARY OF SIMILORS DIVISION OF CORPORATIONS

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