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SECRETARY OF STATE ALLAHASSEE, FLORIDA

2001 MAR 26 P 12: 30

COVER LETTER

TO: Registration Se Division of Co				
SUBJECT:	CAUHÍLL PR (Name of Limite	COPERTIES LLC		
	(Name of Limite	d Liability Company)		
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
STEV	EN J. BERRYI	YILL Name of Person)		
	,	raine of reison)		
		(m) (a)		
		(Firm/Company)		
1208	NW 6th STI	REET, STE B.		
		(Address)		
- GAINE	esuice, fl 32	2601-2218		
	(City	/State and Zip Code)	ZE TAL	
For further information	concerning this matter, please	call:)] MAR CRETA	77
	•		S 25 N	-
STEVEN J. T	3 ERRYHILL	at (352) 376 - (Area Code & Daytime T	44376	
(Name	of Person)	(Area Code & Daytime T		O
Enclosed is a check for	or the following amount:		12: 30 STATE ORIDA	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy	\$160.00 Filing Certificate of Stat	
		(additional copy is enclosed)	Certified Copy (additional copy is en	closed)
	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

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
		•
•	•	

(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 principal office of the Limited Liability Company is:

rincipal Office Address:	Mailing Address:
1208 NW 6th STREET, STE B	1208 NW 6 by STREET, STE B
GAINESUILLE, FL 32601-2218	GAINESVILLE, FI 32601-2218

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:	SE Z	
STEVEN J. BERRYHIU A	ORF	
1208 NW 6 + STREET, STE B Florida street address (P.O. Box NOT acceptable)	<u> </u>	
Florida street address (P.O. Box <u>NOT</u> acceptable)	ი <u> </u>	ö
64 INFSVILLE FL 3260/- 221883 City, State, and Zip	12: 30	

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

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	STEVEN J. BERKYHIU 1208 NW 6th STREET, STE B GAINESVILLE, FL 32601-2218
mGRM	ARMAND 5. CAUDRON 17079 SW 138 TO LANE ARCHER, FL 32618
·	SECRET AHAR
(Use attachment if necessary)	2b F SSEE.
ARTICLE V: Effective date, if other than the d (If an effective date is listed, the date must be to or 90 days after the date of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than the business days prior
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.)

STEVEN J. TSERRYHILL
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent
30.00 Certified Copy (Optional)
50.00 Certificate of Status (Optional)