

L07000034599

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

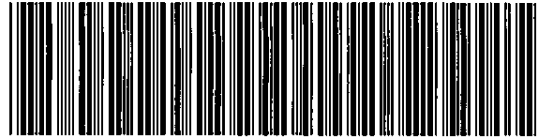
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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*Overstreet Land Investments,
LLC*

File 2nd

Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

Art of Inc. File _____
LTD Partnership File _____
Foreign Corp. File _____
L.C. File _____
Fictitious Name File _____
Trade/Service Mark _____
Merger File _____
Art. of Amend. File _____
RA Resignation _____
Dissolution / Withdrawal _____
Annual Report / Reinstatement _____
Cert. Copy _____
Photo Copy _____
Certificate of Good Standing _____
Certificate of Status _____
Certificate of Fictitious Name _____
Corp Record Search _____
Officer Search _____
Fictitious Search _____
Fictitious Owner Search _____
Vehicle Search _____
Driving Record _____
UCC 1 or 3 File _____
UCC 11 Search _____
UCC 11 Retrieval _____
Courier _____

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**ARTICLES OF ORGANIZATION
FOR
OVERSTREET LAND INVESTMENTS, LLC**

ARTICLE I - Name:

The name of this Limited Liability Company is **Overstreet Land Investments, LLC** (the "Company").

ARTICLE II - Address:

The mailing and street address of the principal office of the Limited Liability Company is:

7932 W. Sand Lake Road
Suite 300
Orlando, Florida 32819

ARTICLE III - Registered Agent, Registered Office & Registered Agent Signature:

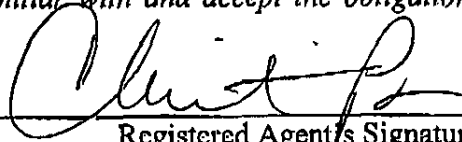
The name and the Florida street address of the registered agent are:

Christina M. Page Esquire
Name

7932 Sand Lake Road, Suite 204
Florida street address (P.O. Box NOT ACCEPTABLE)

Orlando, Florida 32819
City, State and Zip

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 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.



Registered Agent's Signature

ARTICLE IV - Duration:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE V - Management:

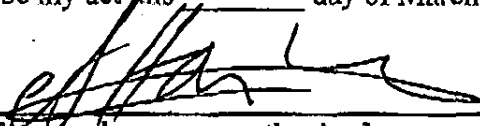
The Company is to be managed by a manager and the name and address of the manager is:

Phoenicia Overstreet, LLC
7932 W. Sand Lake Road
Suite 300
Orlando, Florida 32819

ARTICLE VI - Members Rights to Continue Business:

The remaining members of the Company have the right to continue the business in the event of the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a Member or the occurrence of any other event, which terminates the continued membership of a Member in the Company.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this _____ day of March 2007.



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.)

A. Tom Harb

Typed or printed name of signee