# L07000041783

•		
(Re	equestor's Name)	
(Ac	ldress)	
(//	ldress)	<del></del>
(AC	idiess)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	<b></b> WAIT	MAIL
<del></del>	<del></del>	<del></del>
	· · ·	
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
	<b>-</b>	
r		
Special Instructions to Filing Officer:		
		1





100097134871

04/18/07-01043-006 \*\*125.00

2001 APR 18 P 12: 41
SECRETARY OF STATE
ALLAHASSEE, FI ORIGA

AL

# Corporate direct/

Creating Your Financial Future.\*

2248 Meridian Boulevard, Suite H Minden, Nevada 89423

775-782-2201 - Main 877-683-9343 - Main -Toll Free 775-824-0105 - FAX 775-284-7162 - Cammie Direct

April 16, 2007

Secretary of State – Florida Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Attn: Brenda Tadlock

Re: FL 1234 LLC

FL 1334 LLC FL 434 LLC

Dear Ms. Tadlock:

Enclosed please find Articles of Organization for each of the above-captioned entities. The clients are trying to close on some properties by April 24<sup>th</sup>. Anything you can do to file as soon as possible would be greatly appreciated. Once filed, please provide confirmation of the filing at your earliest opportunity.

Thank you for your attention to this request. Should you have any questions, please do not hesitate to give me a call.

Sincerely,

Cammie Warburton
Account Representative

:cw

Enclosures

### TRANSMITTAL LETTER

Division of Corporations	
UBJECT: FL 1334 LLC	
(Name of Limited Liability Company)	
he enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following	owing:
Cammie Warburton	
(Name of Person)	
Cammie Warburton	
(Firm/Company)	
2248 Meridian Boulevard, Suite H	Z001 SEC TALL
(Address)	~~.
Minden, Nevada 89423	- I 8
(City/State and Zip Code)	ם מיב
For further information concerning this matter, please call:	OF STATE
Cammie Warburton at ( 775 ) 284-7162	
(Name of Person) (Area Code & Daytime Telephor	ne Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ncipal office of the Lin	nited Liability Company is
Principal Office Address: Mailing Add	
Post Office Box 2869	
Jackson, Wyon	ning 83001
gistered agent are:	Agent AHASSEE, FLORIDA
200 <u>110 1</u> 4000 ptable)	_
FLORIDA 34232	_
	Mailing Adding Adding Post Office Box  Jackson, Wyon  Office, & Registered gistered agent are:  Box NOT acceptable)

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

#### 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:		
MGRM	Wobbins Investments LLC Post Office Box 2869 Jackson, Wyoming 83001		
		<del></del>	
	L ⊆		
<del></del>	SS		
(Use attachment if necessary)	ORIDA	# <u>2</u>	

NOTE: An additional article must be added if an effective date is requested.

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.)

CAMMIE WARBURTON, ORGANIZED

Typed or printed name of signee

#### Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)