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(Demonstrate News)		
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04/30/07--01038--016 **130.00

COVER LETTER

_	on Section of Corporations			
SUBJECT:	FLORIBA ORLAND (Name of Limite	O ENTERPRISES	LLC	_
	(Name of Limite	ed Liability Company)		
The enclosed Artic	les of Organization and fee(s) are s	submitted for filing.		
Please return all co	rrespondence concerning this matte	er to the following:	~	
<u> </u>	DAYNE LAYTON	Name of Person)		
F	LORIDA ORLANDO	ENTERPRISES,	26	
			2001 MAY -2 SECRETARY ALLAHASSE	П
	36 ANHINGA RE	(Address)	7-2 ARY VSSE	
1.	111/1/0 GDD 11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/	6 37708		
	INTER SPRINGS,	/State and Zip Code)		
			29 IIE IIDA	
For further informa	tion concerning this matter, please	call:		
WAYNE	E LAY TO N Name of Person)	at (407) 227-	2466	
, (1	value of 1 quison)	(Area Code & Daytime 10	elephone Number)	
Enclosed is a chec	ck for the following amount:			
\$125.00 Filing 1	Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of State Certified Copy (additional copy is end	us &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
FLORIDA ORLANDO EN (Must end with the words "Limited Liability Company, "Limited	TERPRISES, LLC Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
636 ANHINGA RD WINTER SPRINGS, PL. 32708	WINTER SPRINGS, PL. 32708
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the remainder of the r	gistered agent are: SEF OF STATE Or STA
<u>636 ANHINGA</u> Florida street addr	ess (P.O. Box NOT acceptable)
WINTER SPRINGS City, State, an	FL 32708 d 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 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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
<u>MGR</u>	WAYNE LAYTON LIVE ANIHINGA RD WINTER SPRINGS, FR. 32708
	TALL SEC
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date	of filing: (OPTIONAL)
(If an effective date is listed, the date must be specto or 90 days after the date of filing.)	cific and cannot be more than five business days prior
REQUIRED SIGNATURE:	A)
(In accordance with section of this document constitutes that the facts stated herein	nauthorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.) LAY To war printed name of signee
Signature of a member or a (In accordance with section of this document constitutes that the facts stated herein	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)

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)