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COVER LETTER

Division of Corporations	
SUBJECT: 452 Eustis, LLC	
	d Liability Company)
The enclosed Articles of Organization and fee(s) are s	ubmitted for filing.
Please return all correspondence concerning this matter	er to the following:
Jeffrey Randazzo	
	Name of Person)
Randazzo Development,	LLC
	Firm/Company)
133 West 6th Street	
	(Address)
Mount Dora, Florida 327	' 57
(City.	/State and Zip Code)
For further information concerning this matter, please	call:
Clifford B. Shepard	at (407) 629-4323 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\int \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Silfont Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address 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:	
452 Eustis, LLC	
(Must end with the words "Limited Liability Company, "L.L.C.," or "L	LC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
133 West 6th Street	133 West 6th Street	
Mount Dora, Florida 32757	Mount Dora, Florida 32757	_
		_

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:

Jeffrey Ra	andazzo
	Name
133 West	6th Street
F	orida street address (P.O. Box NOT acceptable)
Mount Do	ra, FL 32 <u>7</u> 57
	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 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 auties, 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 (REQUIRE)

(CONTINUED)
Page 1 of 2

2007 DEC -6 PM 2: 4: SECRETARY OF STATE

The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGRM Jeffrey Randazzo 133 West 6th Street Mount Dora, FL 32757 (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 specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE IV- Manager(s) or Managing Member(s):

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Jeffrey Randazzo

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Page 2 of 2

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.)

Typed or printed name of signee