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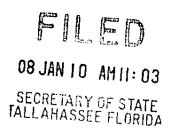
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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	ECT: Liquid NRG Concepts LLC (Name of Limited Liability Company)
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Ernie Hartlieb (Name of Person)
	Liquiel NRG Concepts LLC (Firm/Company)
	(bloso Crestridge Loop, apt #1736) (Address)
	Fort Myers FL 33912— (City/State and Zip Code)
For fur	ther information concerning this matter, please call:
<u> </u>	Ernie Hartlieb at (239) 272 - 2266 (Name of Person) (Area Code & Daytime Telephone Number)
Enclos	sed is a check for the following amount:
□\$125.	00 Filing Fee \$\ \text{S130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Electronic Articles of Organization For Florida Limited Liability Company



Article I

The name of the Limited Liability Company is: Liquid NRG Concepts, LLC

Article II

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

6650 Crestridge Loop Apt 1736 Ft. Myers, FL 33912

The mailing address of the Limited Liability Company is

6650 Crestridge Loop Apt 1736 Ft. Myers, FL 33912

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

Article IV

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

Cathe Harvey 6700 Sabel Ridge Ln Naples, FL 34109 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 statues 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 Signature:

Article V

The name and address of managing member/managers are:

Title: MGRM Ernie Hartlieb

6650 Crestridge Loop Apt 1736

Ft. Myers, FL 33912

Signature of member or an authorized representative of a member

Signature:

Ernie Hartlieh

JAN 10 AH 11: 03
CRETARY OF STATE
LAHASSEE FLORIDA

KRISTINA RODRIGUEZ
Notary Public, State of Florida
Commission# DD644926
My comm. expires Feb. 27, 201

CRISTINA PANDIBUEZ