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(Requestor's Name)						
,						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

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SECRETARY OF STATE

N. Guilligam JAN 1 4 2008

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: College Park Tan LLC		
		ited Liability Comp	eany)
The en	nclosed Articles of Organization and fee(s) are	e submitted for filin	rg.
Please	return all correspondence concerning this ma	atter to the following	g:
	G. Ladon Johnson Jr.		
		(Name of Person)	
	College Park Tan LLC		
		(Firm/Company)	
	1120 W. Harvard Street		
		(Address)	
	Orlando, Fl 32804		
	(C	ity/State and Zip Cod	c)
For fu	rther information concerning this matter, pleas	se call:	
Rob	ert Moses	_{at (} 321	947-6655
(Name of Person)		(Area Cod	e & Daytime Telephone Number)
Enclo	sed is a check for the following amount:		
\$125	.00 Filing Fee \$\times \text{130.00 Filing Fee & Certificate of Status}	\$155,00 Filir Certified Co (additional cop	py Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Exc	purier Address ion Section of Corporations Building ecutive Center Circle see, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	:
College Park Tan LLC. (Must end with the words "Limited Liab	ility Company, "L.L.C" or "LLC.")
ARTICLE II - Address:	
	principal office of the Limited Liability Company is:
The maning address and shoot address of the p	The part of the manner and the party of the
Principal Office Address:	Mailing Address:
4400 M. Harrand Obrash	
1120 W. Harvard Street	1120 W. Harvard Street
Orlando, FI 32804	Orlando, Fl 32804
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registeries business entity with an active Florida registration.) The name and the Florida street address of the G. Ladon Johnson Name	registered agent are: CR CR CR CR CR CR CR C
1120 W. Harvard St	reet RA _ OF THE STATE OF THE S
_	Idress (P.O. Box NOT acceptable)
Orlando, Fl 32804	FL
City, State,	and Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:			
"MGR" = Manager				
"MGRM" = Managing Member				
MGRM	G. Ladon Johnson Jr.			
	1120 W. Harvard Street			
	Orlando, Fl 32804			
MGRM	Robert J. Moses			
	1 W. Steele Street			
	Orlando, Fl 32804			
MGRM	James Jared Johnson			
	1605 Tulane Street			
	Orlando, FI 32804			
				
				
(Use attachment if necessary)				
ARTICLE V: Effective date, if other than	the date of filing	(OPTIO)	NAL)	
·	est be specific and cannot be more than five b	•	,	
to or 90 days after the date of filing.)				
	1			
<u>REQUIRED</u> SIGNATURE:			0	
		SEC	80	<u> </u>
		平沼	JAN	المنتسبين
Signature of a mo	ember or an authorized representative of a member.	. FIST		Commences.
(Se accordance voi	th section 608.408(3), Florida Statutes, the execution	38.		177
	constitutes an affirmation under the penalties of perjury	Y OF	PM 12:	ال فا ن <u>ا</u> التحصير
that the facts sta	ated herein are true.)	0.1	$\dot{\omega}$	
G. Ladon .	Johnson Jr.	RATE	5	
	Typed or printed name of signee	`>'		

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)