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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

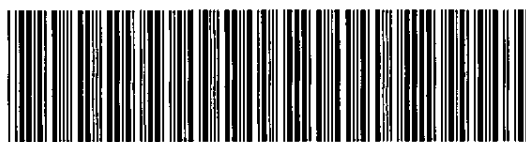
(Business Entity Name)

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TALLAHASSEE, FLORIDA

B. KOHR
MAR 3 2008
EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Noel Properties, LLC

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- Art of Inc. File _____
- LTD Partnership File _____
- Foreign Corp. File _____
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- Fictitious Name File _____
- Trade/Service Mark _____
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- Art. of Amend. File _____
- RA Resignation _____
- Dissolution / Withdrawal _____
- Annual Report / Reinstatement _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
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- Courier _____

Signature _____

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du 3/3 9:00
Name Date Time

Walk-In _____ Will Pick Up _____

ARTICLES OF ORGANIZATION

FOR

Noel Properties LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **Noel Properties LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office address of the company is **10941 Gladiolus Drive, Fort Myers, FL 33908**. The mailing address of the company is **P.O. Box 08687, Fort Myers, FL 33908**.

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Michael F. Kayusa, 2400 First Street, Suite 303, Fort Myers, FL 33901.**

ARTICLE IV: MANAGING MEMBERS

The name and address of the initial Managing Member of the company is:

Austin Noel, Managing Member, 10941 Gladiolus Drive, Fort Myers, FL 33908

The undersigned has executed these Articles of Organization this 3rd day of March 2008.

"Your Capital Connection, Inc. by, Weimar Lopez, Client Representative"



Authorized Representative

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1. The name of the company is: Noel Properties LLC

2. The name and address of the registered agent and office is: Michael F. Kayusa

2400 First Street, Suite 203
Fort Myers, FL 33901

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.

