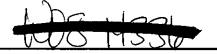
(Red	questor's Name)
. (Add	dress)	
(Add	dress)	
(City	//State/Zip/Phor	ne #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Na	me)
(Doc	cument Number)
Certified Copies	Certificate	s of Status
Special Instructions to F	Eiling Officer	

L. SELLERS

APR - 1 2008

EXAMINER



Office Use Only



400120483814

03/17/08--01041--016 **130.00

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	_{ECT:} if only	the walls could tal	k IIc		
		(Name of Limite	ed Liability Compar	ıy)	
The er	nclosed Articles o	f Organization and fee(s) are	submitted for filing.		
Please	return all corresp	oondence concerning this matt	er to the following:		
	john t nee	dham			
			Name of Person)		
	if only the	walls could talk lic	;		
			(Firm/Company)		
	681 south	hwy 97			
	1. 1. 1. 1. 1. 1.	···········	(Address)		
	cantonme	nt fl. 32533			
		(Cit <u>y</u>	//State and Zip Code)		
For fu	rther information	concerning this matter, please	call:		
jack	needham		at ()	418-458	0
	(Name	e of Person)	(Area Code		phone Number)
Enclo	sed is a check for	or the following amount:			
\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	у	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registratio Division o Clifton Bu 2661 Exec	of Corporations	



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 18, 2008

JOHN T. NEEDHAM 681 SOUTH HIGHWAY 97 CANTONMENT, FL 32533

SUBJECT: IF ONLY THE WALLS COULD TALK LLC

Ref. Number: W08000014336

We have received your document for IF ONLY THE WALLS COULD TALK LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on March 17, 2008. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 908A00016374

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
if only the walls could talk lic				
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:				
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
681 south hwy 97	681 south hwy 97			
cantonment fl. 32533	cantonment fl. 32533			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registations) business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another			
jack needham homes inc				
Name				
681 south hwy 97				
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)			
cantonment	FL 32533			
City, State, a	nd 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 2008 APR -1 PM 1:27
SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

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

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
manager	john t needham
	681 south hwy 97
	cantonment fl. 32533

ARTICLE V: Effective date, if other than the date of filing. Grand Copyrion (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.)

REQUIRED SIGNATURE:

(Use attachment if necessary)

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.)

john t needham

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)

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SECRETARY OF STATE

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