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(Requestor's	Name)
(Address)	
(Address)	
(City/State/Z	ip/Phone #)
PICK-UP V	VAIT MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Ce	rtificates of Status

Special Instructions to Filing Officer:

L. SELLERS

MAY 14 2008

EXAMINER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Law Offices of

Caruso, Swerbilow & Camerota, P.A.

JOE TEAGUE CARUSO
BOARD CERTIFIED CIVIL TRIAL LAWYER
SENIOR PARTNER

HOWARD M. SWERBILOW
BOARD CERTIFIED CRIMINAL TRIAL LAWYER
LICENSED IN FLORIDA
WASHINGTON D.C.
ARIZONA
MARILAND

JOHN J. CAMEROTA LICENSED IN FLORIDA MASSACHUSETTS.

May 7, 2008

190 FORTENBERRY ROAD SUITE 107 MERRITT ISLAND, FLORIDA 32952

TELEPHONE: 321-453-3880 FACSIMILE: 321-453-0112

INTERNET E-MAIL: JOEC@JTCHMSPA.COM HOWARDS@JTCHMSPA.COM JOHNC@JTCHMSPA.COM

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Filing of King's Duck Inn, LLC

Gentlemen:

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to me at the above address.

If you should have any questions or need further information please call me at 321/453-3880.

Enclosed is a check for \$130.00 for the filing fee and Certificate of Status.

Thank you for your assistance in this matter.

Best personal regards,

JTC/dg Encl.

cc: Client

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is: KING'S DUCK INN, LLC.

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLAU" or "L.c.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4135 N. Couramay Pkwy. Merritt Island, FL 32953

4155 N. Courtenay Plays., Merritt Island, FL. 32953

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:

JOE TEAGUE CARUSO, ESQ.

190 Fortenberry 3d., Suite 107,

Merritt Island, FL 32952

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, FS..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

SECRETARY OF STATE

<u>Title:</u>
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGRM

Stephen Douglas Jesanis 4155 N. Courtenay Pkwy. Merritt Island, FL 32953

ARTICLE V: Effective date, if other than the date of filing: Date of Filing (OPTIONAL) (If an effective date is listed, the date must be specific and connot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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.)

Stephen Douglas Jesanis
Typed or printed name of signee

Filing Fees:

\$125.00 Fiting 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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