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(Requestor's	Name)
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EXAMINER



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06/02/03--01006--013 **160.00



COVER LETTER

Division of Corporations							
_{subject:} Monongahela	Investors	, LLC					
)	(Name of Lim	ited Liability Compa	any)				
The enclosed Articles of Organization	on and fee(s) are	e submitted for filing	g.				
Please return all correspondence cor	ncerning this ma	tter to the following	;				
W. Rodgers Moor	е						
		(Name of Person)					
W. Rodgers Moo	re, P.A.						
		(Firm/Company)			AEC SEC	799	
1900 Glades Roa	d, Suite 4	01			AHA.		C.PO.
		(Address)		•	38 ¥ €	-2	
Boca Raton, FL 3	3431					ש	
	(C	ity/State and Zip Code	:)		SAT A		
For further information concerning	this matter, pleas	se call:		-	D Tu	5 . 5	
W. Rodgers Moore		_ _{at (_} 561	394-794	4			
(Name of Person)			e & Daytime Tele	phone Numb	er)	-	
Enclosed is a check for the follow	ving amount:						
\$125.00 Filing Fee \$130.00 Certific	Filing Fee & ate of Status	\$155.00 Filin Certified Co (additional copy	ру	\$160.00 F Certificat Certified (additional	te of St Copy	atus &	
Division P.O. Box	on Section of Corporations	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporations uilding cutive Center C ee, FL 32301	ircle			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company	is:
Monongahela Investors, LLC	
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1900 Glades Road	Same
Suite 401	
Boca Raton, FL 33431	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another

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

W. Rodgers Moore, P.A.

ARTICLE I - Name:

1900 Glades Road, Suite 401

Florida street address (P.O. Box NOT acceptable)

Boca Raton, FL 33431_{FL}
City, State, and 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

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

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

Title: "MGR" = Ma	_	Name and Address:
MGR MGR	Managing Member	Et Dugueses Investment Comment
WGK		Ft. Duquense Investment Company 1900 Glades Road, Suite 401
		Boca Raton, FL 33431
		DOCA RAIOH, FL 33431
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(Use attachm	ent if necessary)	
T TO S.Z. 1000 .	t taken a a	A CCU (OPTIONA
ffective date is	s listed, the date must le date of filing.)	e date of filing: (OPTIONA be specific and cannot be more than five business day
REQUIRED	SIGNATURE:	
	Signature of a memb	per or an authorized representative of a member.
	(In accordance with se	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

Typed or printed n

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)