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RECRETARY OF STATE

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COVER LETTER

TO: Registration Section
Division of Corporations

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SUBJECT: Great Adventures Limousine & Charter LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karey S. Johnson Sr		
(N	ame of Person)	
(F	Firm/Company)	· · · · ·
6000 - 25th Way South		
	(Address)	2990 SEC
St. Petersburg, FL 33712	2	FR J. T
(City/S	State and Zip Code)	ARY ASSEE
For further information concerning this matter, please c	all:	
	727 278-6830	ORIDE _
(Name of Person)	(Area Code & Daytime Telephone	Number)
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}	Certified Copy Cer (additional copy is enclosed) Cer	0.00 Filing Fee, tificate of Status & tified Copy litional copy is enclosed)
Mathing Address	044/0	

Mailing Address

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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Great Adventures Limousine & Charter LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

	
6000 - 25th Way South	6000 - 25th Way South
St. Petersburg, FL 33712	St. Petersburg, FL 33712
	Registered Office, & Registered Agent's Signature: as own Registered Agent. You must designate an individual or another
business entity with an active Florida registration	,
The name and the Florida street addre	بد م النواد
<u>Karey S. Jo</u>	hnson Sr
•	Name E

6000 - 25th Way South
Florida street address (P.O. Box NOT acceptable)

St. Petersburg, FL FL 33712
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..

> (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:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Leonard Roberts
	6761 14th way south
	St. Petersburg, FL 33705
MGR	Karey S. Johnson Sr
	6000 - 25th Way South 5
	St. Petersburg, FL 33712
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	J. L.
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LE V: Effective date, if other than the defective date is listed, the date must be days after the date of filing.)	

(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.)

Karey S. Johnson Sr

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)