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Special Instructions to Filing Officer:

L. SELLERS

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EXAMINER

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COVER LETTER

Division of Corporations				
SUBJECT:	SWC H	oldings LLC Liability Company)		
	(Name of Limited	Liability Company)		
The enclosed Articles	of Organization and fee(s) are su	bmitted for filing.		
Please return all corres	spondence concerning this matter	to the following:		
Mary Park Street P	Daniel	E. Campo Name of Person)		
- Name of the order and construction of the same	Swc A	Ioldings LL	<u>c</u>	
	P. O. B.	x 24/0 (Address)		
·				
<u></u>	Brando	n FL. 335 State and Zip Code)	09	
	(City/	State and Zip Code)		
For further information	n concerning this matter, please of	all:		
Daniel (Nam	E. Campo ie of Person)	at (<u>813</u>) <u>610</u> · (Area Code & Daytime Tele	- 9299 ephone Number)	
Enclosed is a check	for the following amount:	·		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & X Certified Copy (additional copy is enclosed)	\$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	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
SWC Holdin (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3519 John Moore Rd. Brandon, Fl. 33511	P. O. Box 2410 Brandon, Fl. 33509
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re	gistered agent are:
Daniel E. Name	Campo
	ess (P.O. Box <u>NOT</u> acceptable)
Brandon City, State, ar	FL 335// nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S
Daniel &	E. Campo PASSO
Registered Agent's Signatu	-3 AMO
(CONTINU Page 1 of 2	(ED) = 3 Of

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Daniel E. Campo 3519 John Moore Rd. Brandon, Fl. 33511
(Use attachment if necessary) ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must b to or 90 days after the date of filing.)	e date of filing: July 1, 2008. (OPTIONAL) se specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a member	E. Campor er or an authorized representative of a member.
(In accordance with se of this document const that the facts stated l	ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury herein are true.)
Dani Ty Filing Fees:	vped or printed name of signee
\$125.00 Filing Fee for Articles of Orga of Registered Agent	SECRETARY AND SECRETARY SE

Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)