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T. CLINE

JUL - 8 2008

**EXAMINER** 

## **COVER LETTER**

	ration Section n of Corporations	
SUBJECT: _	Points South Enterprises, LLC	
	(Name of Limited Liability Company)	
The enclosed A	ticles of Organization and fee(s) are submitted for filing.	
Please return a	correspondence concerning this matter to the following:	
	David R. York	
<del></del>	(Name of Person)	
	Callister Nebeker & McCullough	
	(Firm/Company)	
	2180 South 1300 East, Suite 600	
<u></u> .	(Address) コーク	COCO COCO COCO COCO COCO COCO COCO COC
	Salt Lake City, Utah 84106	
	(City/State and Zip Code)	
For further info	mation concerning this matter, please call:	11 JUL -7 PM 1:45
Da	vid R. York at (801 ) 530-7391	ं क
	(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a	heck for the following amount:	
<b>⊴</b> \$125.00 Filir	Fee \$\int_{\$130.00}\$ Filing Fee & \$\int_{\$155.00}\$ Filing Fee & \$\int_{\$160.00}\$ Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	ıs &
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY					
ARTICLE I - Name:					
The name of the Limited Liability Company is:					
Points South Enterprises, LLC  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")					
(Must end with the words "Limited	Liebility Company, "E.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;				
1201 Hays Street	2727 Meadow Creek Drive				
Tallahassee, FL 32301	Park City, Utah 84060				
	लंडू च				
The name and the Florida street address of Corporation Ser					
1201 Hays Street					
	et address (P.O. Box <u>NOT</u> acceptable)				
Tallahassee	FL 32301.				
Čity, St	tate, and Zip				
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complete accept the obligations of my position as  Corporation Set Mail Mail Mail Mail Mail Mail Mail Mail	Signature (REQUIRED)				
James Grier, Au	thorized Representative				

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Willard L. Lange, Jr. 2727 Meadow Creek Drive Tallahassee, FL 32301
- Marian Annyaga - Annya Maria	
·	:pl 15.5
(Use attachment if necessary)	SEER JUL
ARTICLE V: Effective date, if other than the	date of filing: (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	or an authorized representative of a member.
(In accordance with sect	tion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury
Willard L. I	ange, Jr., Manager ed or printed name of signee

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

\$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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Filing Fees: