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SECRETARY OF STATE
TALLAHASSEE FLORINA

T. HAMPTON

JUL 1 4 2008

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corpor				
SUBJE	ECT: FBN Hold	lings, LLC			
		(Name of Limited L	iability Compa	any)	
The en	closed Articles of Org	anization and fee(s) are subn	nitted for filing	3.	
Please	return all corresponde	nce concerning this matter to	the following	:	
	William J. Bei	nson			
		(Nan	ne of Person)		
	FBN Holding	s, LLC			
		(Fir	n/Company)		
	P.O. Box 291	579			
		(Address)		
	Port Orange,	FL 32129			
		(City/Sta	ite and Zip Code	:)	
For fur	ther information conc	erning this matter, please cal	l:		
Willi	am J. Benson	l at	407	446-7395	5
	(Name of Pe		(Area Cod	e & Daytime Tele	ohone Number)
Enclos	sed is a check for the	e following amount:			
√ \$125.		130.00 Filing Fee & Sertificate of Status	\$155.00 Filin Certified Co (additional cop	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Re D P.	lailing Address egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Registrati Division Clifton E 2661 Exc	ourier Address ion Section of Corporations Building ecutive Center Cisee, FL 32301	rcle



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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 3, 2008

WILLIAM J BENSON P O BOX 291579 PT ORANGE, FL 32129

SUBJECT: FBN HOLDINGS, LLC Ref. Number: W08000031900

We have received your document for FBN HOLDINGS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L04000087154 (FBN HOLDINGS, LLC).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 908A00039667

Registration/Qualification Section

Al

ARTICLES OF ORGANIZATION FOR	FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Company	is:
FBN Investments, LLC	
(Must end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
825 Pine Tree Court	P.O. Box 291579
Port Orange, FL 32127	Port Orange, FL 32129
	red Office, & Registered Agent's Signature: egistered Agent. You must designate an individual or another ne registered agent are:
Na.	me
825 Pine Tree Cou	srt
	address (P.O. Box NOT acceptable)
Port Orange, FL 33	212 7 1
	te, and Zip
liability company at the place designated in registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all a performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S
Registered Agent's Sig	SECNETARY OF STALLAHASSEE, FL

(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" = Man "MGRM" = M	ager anaging Member	Name and Address:	
MGRM		William J Benson	
- INGRIVI		P.O. Box 291579	
		Port Orange, FL 32129	
		Toft Grange, TE 02129	
	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
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	listed, the date must be date of filing.)		
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