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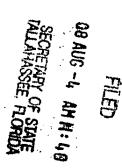
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COVER LETTER '

Division of Corporations		
SUBJECT: 1714 NW 7th PL, LLO	C	
50508011	ed Liability Company)	
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Mark V. Dennis, Pres.		
	(Name of Person)	
1714 NW 7th PL, LLC		
	(Firm/Company)	
336 Stirrup Key Blvd.		
	(Address)	
Marathon, Florida 3305	0	
(Cit	y/State and Zip Code)	
For further information concerning this matter, please	e call:	
Mark Dennis	at 239 822.3300	
(Name of Person)	at (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	Aug.	
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & ✓ \$160.00 Filing Fee Certified Copy (additional copy is enclosed) 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 Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1714 NW 7th PL, LLC	
(Must end with the words "Li	mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
I I III CIDAI OTHICE AUGI ESS.	
Timelpai Office Address.	
336 Stirrup Key Blvd.	336 Stirrup Key Blvd.

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

Mark V. Dennis, Ress. Name

336 Stirrup Key Blvd.

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

Marathon, Florida 33050

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)

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	Name and Address:	
"MGRM" = Managing Member		
MGR	Mark Dennis	
	336 Stirrup Key Blvd.	
	Marathon, Florida 33050	
MGRM	Allison Dennis	
	336 Stirrup Key Blvd.	
	Marathon, Florida 33050	
(Use attachment if necessary)		

ARTICLE V: Effective date, if other than the date of filing: <u>July 31, 2008</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(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.)

Allison Dennis

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)