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AUG 26 2008

EXAMINER

DAVID J. SIMMONS CO., A Legal Professional Association

DAVID J. SIMMONS, J.D., M. TAX, L.L.M. (ESTATE PLANNING) BOARD CERTIFIED WILLS, TRUSTS & ESTATES FELLOW AMERICAN COLLEGE OF TRUST AND ESTATE COUNSEL

MEMBER OF OHIO AND FLORIDA BARS

August 20, 2008

PHONE: 330.499.8899

FAX: 330.499.1714

E-MAIL: dsimmons@djsestatelaw.com

Florida Department of State Division of Corporations Corporate Filings P. O. Box 6327 Tallahassee, FL 32314

Re: Blanche M. Downs Limited Liability Company

Dear Sir or Madam:

Enclosed is an executed Articles of Organization for the above-mentioned limited liability company. Please file the same and return a time-stamped copy to the undersigned in the envelope provided. Our firm's check in the amount of \$125.00 is enclosed.

Thank you for your assistance in this matter.

Very truly yours,

David J. Simmons

DJS:mrm

Enclosures

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Blanche M. Downs Limited Liability Co	ompany	
(Must end with the words "Limited Liability Company,"	"Limited Company" or their abbreviation "LLC,"	or "L.C.,")
ARTICLE II - Address:		
The mailing address and street address of t	he principal office of the Limited Lial	bility Company is:
Principal Office Address:	Mailing Address:	
31515 Avenue F	31515 Avenue F	
Big Pine Key, FL 33043	Big Pine Key, FL 33043	
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)		
The name and the Florida street address of	the registered agent are:	JALLAT TALLAT
Blanche M. Downs		
1	Name	G 25 TARY
31515 Avenue F		그 만을 그 [1
Florida stre	eet address (P.O. Box <u>NOT</u> acceptable)	r= (/)
Big Pine	Key, _{FL} 33043	ORIE 2

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)

City, State, and Zip

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGRM	Blanche M. Downs 31515 Avenue F Big Pine Key, FL 33043		
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date of	ALLASCE SECRETARIA SEC		CONTROL CONTRO
(If an effective date is listed, the date must be specto or 90 days after the date of filing.)	cific and cannot be more than five business of	laySprio F 	
REQUIRED SIGNATURE:	TATE ORIDA	29	

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.)

Blanche M. Downs Co-Trustee

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)