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PICK-UP	☐ WAIT	MAIL
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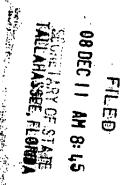


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B. KOHR
DEC 1 5 2008

EXAMINER





ACCOUNT NO. : 072100000032

REFERENCE : 823212 7518993

AUTHORIZATION

COST LIMIT : \$ 155.00

ORDER DATE: December 11, 2008

ORDER TIME : 3:28 PM

ORDER NO. : 823212-025

CUSTOMER NO: 7518993

DOMESTIC FILING

NAME: CONNIE'S, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ___ CERTIFIED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS:



FLORIDA DEPARTMENT OF STATE
Division of Corporations

Division of Corporations

Please give original date.

December 12, 2008

KIMBERLY MORET CSC TALLAHASSEE, FL

SUBJECT: CONNIE'S, LLC Ref. Number: W08000055158

We have received your document for CONNIE'S, LLC and the authorization to debit your account in the amount of \$155.00. However, the document has not been filed and is being returned for the following:

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.

Please select a new name and make the correction in all appropriate places one are major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 308A00060122

ARTICLES OF ORGANIZATION

FOR

CONNIE STPROPERTIES, LLC

A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I-Name:

The name of the Limited Liability Company is:

CONNIE'S PROPERTIES, LLC

ARTICLE II-Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

6244 Bright Bay Ct. Apollo Beach, FL 33572

ARTICLE III-Registered Agent, Registered Office, & Registered Agent's Signature:

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

OWENS LAW GROUP, P. A. 811-B Cypress Village Blvd. Ruskin, FL 33573-6724

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 obligations of my position as registered agent as provided for in Chapter 608, F.S.

astrid m. sieva, eso.

on behalf of OWENS LAW GROUP, P. A., Registered Agent

ARTICLE IV-Management

The Limited Liability Company is to be managed by one or more members and is, therefore, a member-managed company.

ARTICLE V-Managing Members(s):

The name and address of the Managing Member is as follows:

Title: MGRM Name and Address: BOBBY L. RAMEY 6244 Bright Bay Ct. Apollo Beach, FL 33572

ARTICLE VI-Effective Date:

This Limited Liability Company is to become effective upon listing of this certificate with the Secretary of State.

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.

* Boly I Romers
BOBBY TRAMEY