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EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations
SUBJI	(Name of Limited Liability Company)
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	(Name of Person)
	CARLETT ALC LLC (Firm/Company)
	455 TULY TREE IX.
	LANTANA VL 33462 (City/State and Zip Code)
For fur	ther information concerning this matter, please call:
_ <i>C</i>	(Name of Person) at (SU) 396-3852 TO
	ed is a check for the following amount:
_ _ \$125.	00 Filing Fee \$\begin{align*} \text{\$\sum_{\text{\$130.00}}} \text{Filing Fee & \$\text{\$\sum_{\text{\$\sum_{\text{\$\cute{155.00}}}}} \text{Filing Fee & \$\text{\$\sum_{\text{\$\cute{160.00}}}} \text{Filing Fee, } \text{\$\cute{160.00}} \text{Filing Fee, } \text{\$\cute{160.00}} \text{Filing Fee, } \text{\$\cute{160.00}} \text{\$\cute{160.00}} \text{Filing Fee, } \text{\$\cute{160.00}} \text{\$\cute{160.00}} \text{Filing Fee, } \text{\$\cute{160.00}} \text{\$\cute{160.00}
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "L.IC.," 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:			
HSS TULL TREE DR. LANTANA, KL 33462 SAMC ESS			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature. The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)			
The name and the Florida street address of the registered agent are:			
The name and the Florida street address of the registered agent are: CARRETT LINDER 17.57 17.			
455 TULY TREE DR. Florida street address (P.O. Box NOT acceptable)			
City, State, and Zip			
Having been named as registered agent and to accept service of process for the above stated limited			

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)

(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:		
"MG-K"	GARRETT LINNER 455 THEP TREE DR.		
"YKGRH"	Theresa Linder 455, Tulip Tree Dr. Lantana, 71, 33462		
<u> </u>			
-1 37 (17)			
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 days after the date of filing.)			
to or 90 days after the date of filing.) REQUIRED SIGNATURE:	PHI2: 57 PEE. FLORID		
Lamett Lu			
(In accordance with sec	ction 608.408(3), Florida Statutes, the execution		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee