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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

MAY 18 2009

**EXAMINER** 

### **COVER LETTER**

	Corporations	Object to the Co	
SUBJECT:		Charters, LLC Liability Company	-
	Name of Limited	Liability Company	
The enclosed Articles	of Organization and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Timothy J	. Pursel, Esquire	
	Na	ime of Person	€ S 8
	Pursel 8	k Drinkard, LLC	O9 MAY 15 PM 1: 1 SECRETARY OF STATE OF
<del></del>	Fi	rm/Company	TAR ASS
	10440 Little Patu	kent Parkway, Suite 900	SEE PR
		Address	FIST :
	Columbia	, Maryland 21044	器二
		tate and Zip Code	P
		uminatedgroup.com	
	E-mail address: (to be used for t	uture annual report notification)	
For further informatio	n concerning this matter, please ca	II;	
Timo	thy J. Pursel	, 410 <sub>)</sub> 7	40-2930
	Name of Person at (410 ) 740-2930  Area Code & Daytime Telephone Number		
Englaced is a shoot	Can the Callaggin a consequet.		
_	for the following amount:		
J\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	]\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Courier Address	
	Registration Section Division of Corporations	Registration Section Division of Corporations	3
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center O	

Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
L&P Cha	rters, LLC		
(Must end with the words "Limited	Liability Company," "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is		
Principal Office Address:	Mailing Address:		
68 Mark Twain Lane Rotonda West, FL 33947	68 Mark Twain Lane Rotonda West, FL 33947		
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of	tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:  _ee Poore, Jr.		
Name			
<del></del>	68 Mark Twain Lane		
Florida street address (P.O. Box NOT acceptable)			
Rotonda West, FL 33947 FL  City, State, and Zip			
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as the following statute of the proper and complete accept the obligations of the proper accept the proper accept the obligations of the proper accept the proper	d 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 the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S		

(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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member Not applicable None (Use attachment if necessary) . (OPTIONAL) 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 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

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)

Richard Lee Poore, Jr.

Typed or printed name of signee