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SECRETANSSEE, FLORID

C. LEWIS

DEC 42009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	SJECT: MATTHEW T POPE Name of Limited Liability Company	RTIES
The end	enclosed Articles of Organization and fee(s) are submitted for filing.	
Please	se return all correspondence concerning this matter to the following:	
	STEREING D. HOLLINGSWORTH	
	/ Name of Person	
•	Firm/Company	
	538 W. 4TH AVE	•
	Address	
-	ALLAHASSEE FL 32203 City/State and Zin Code	
_	SUPASTERULUG & YAUGO COM E-mail address: (to be used for future annual report notifi	cation)
For furt	Further information concerning this matter, please call:	,
Ja	PLTNG HOLGTANDUNCTH at (850) 3. Name of Person	22-4562 ime Telephone Number
Enclos	osed is a check for the following amount:	
\$125.0	25.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certified Copy} \text{(additional copy is enclosed)}	Certificate of Status &
	Mailing AddressStreet/Courier ARegistration SectionRegistration SectDivision of CorporationsDivision of CorpP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 ExecutiveTallahassee, FLTallahassee, FL	ion Porations Center Circle



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	3:
MATHEW 7/7 PROPE	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
538 W. 474 AVE	SAME
TAUAHATTECIFC 22303	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registrations)	
The name and the Florida street address of the	(Seise H)
538 W. 4/4	AVE
Florida street address (P.C. ALLAHASTEE City, State,	FL 3230)
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 registered agent as provided for in Chapter 608, F.S..

Registered agent's Signature (REQUIRED)

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:

FILED
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SECRETARY OF SHAFE TALLAHASSEE, FLORIDA

"MGR" = Mar		Name and Address:	
MGRM" = M	lanaging Member	Stering Louising	DNORAH
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(Use attachme	nt if necessary)		
•	nt if necessary)		
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of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)