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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

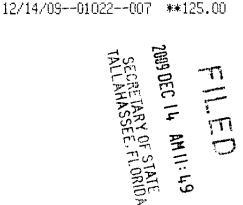
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COVER LETTER

TO:	Registration Section Division of Corporations		ž.	• •		•			
TOWNTECH, LLC									
		Name of Limi	ted Liability Com	pany		-			
The en	closed Articles of Organizati	on and fee(s) are	submitted for fili	ng.					
Please	return all correspondence co	ncerning this ma	tter to the followin	ıg:					
		Ji	mmy D. Harri	s					
			Name of Person						
	TOWNTECH, LLC								
			Firm/Company						
	2004 Olesen Burg Blad								
	8064 Sleepy Bay Blvd.						-11		
	Navarre Florida 32566						FIT		
	City/State and Zip Code						Ţ,		
	Navarre Florida 32566 City/State and Zip Code jimmydeanharris@yahoo.com E-mail address: (to be used for future annual report notification)								
•	E-mail ac	dress: (to be used	for future annual re	port notification)		OF F	-		
For fur	ther information concerning	this matter, pleas	se call:				D		
	Jimmy D. Harr	is	_at (850_		499-8958				
	Name of Person		Area Co	de & Daytime Te	lepnone Number	'			
Enclos	sed is a check for the follow	wing amount:							
\$125.	00 Filing Fee \$130.00	Filing Fee &	\$155.00 Fili	ing Fee & [\$160.00 Fi	ling Fee,			
_		ate of Status	Certified C			of Status &			
			(additional co	py is enclosed)	Certified ((additional o	Copy copy is enclosed)			
	Mailing	Address	Street/9	Courier Addres	s				

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building 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:

TOWNTECH, 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 principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
8064 Sleepy Bay Blvd	8064 Sleepy Bay Blvd
Navarre FL	Navarre Ft.
32566	32566
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration of the registration. Solution 1. The name and the Florida street address of the registration of the registration of the registration. Solution 1. The name and the Florida street address of the registration. Solution 1. The name and the Florida street address of the registration. Solution 1. The name and the Florida street address of the registration. Solution 1. The name and the Florida street address of the registration.	egistered agent are: HARRIS Box NOT acceptable) FL 32566

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>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Jimmy D. Harris
	8064 Sleepy Bay Blvd.
	Navarre Florida 32566
MGRM	Richard Seiden
	12516 Stable House Ct
	Potomac, MD 20854
(Use attachment if necessary)	7.009 TAL
ARTICLE V: Effective date, if other than the dat	te of filing: (OPTIONAL)
(If an effective date is listed, the date must be sp	pecific and cannot be more than five business days prior
to or 90 days after the date of filing.)	English Till
REQUIRED SIGNATURE:	
A 1222 1	Adamo Sissis
Signature of a member of	r an authorized representative of a member.
(In accordance with section of this document constitut that the facts stated herein	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury are true.)
Jimmy Typed	or printed name of signee
Filing Fees:	or bringer with or orbital

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)