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COVER LETTER

то:	Registration Section Division of Corporations				
SUBJE	CT: Fedward DEAN LLC Name of Limited Liability Company				
The enc	losed Articles of Organization and fee(s) are submitted for filing.				
Please r	eturn all correspondence concerning this matter to the following:				
	Edy Ard Dem Name of Person				
_	Name of Person				
-	Firm/Company				
	221-50 101-6 (10				
_	221-Seninole Cor.				
-	HAVANA FI. 32333 City/State and Zip Code				
	·				
_	E-mail address: (to be used for future annual report notification)				
For furth	ner information concerning this matter, please call:				
	Name of Person at (\$50) 210-4079 Area Code & Daytime Telephone Number 19				
Enclose	d is a check for the following amount:				
1	0 Filing Fee \$\int \\$130.00 Filing Fee & \$\int \\$155.00 Filing Fee & \$\int \\$160.00 Filing Fee, \$\int \\$Certificate of Status & Certificate of Status				
٠	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
(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:		
721 Saminole Cre Hayana Fl. 32333		
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:		
221 Semilade Cox Name		
Florida street address (P.O. Box NOT acceptable)		
HAMANA FL 32337 City, State, and Zip		
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 that with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S		
Edward C. Deim 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	
Widical - Wallaging Member	, n
MGRM	Edward C. Lilling 221 Sensole Cia HAVANA FI 32333
22	
(Use attachment if necessary)	09 OB
ARTICLE V: Effective date, if other than the dat	e of filing: 1-1-2010 (OPTIONAL)
to or 90 days after the date of filing.)	pecific and cannot be more than five fusiness days prior
,	<u> </u>
REQUIRED SIGNATURE:	
Elwant	C. Lom
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 that the facts stated herein are true.)	
EDn	or printed name of signee
Filing Fees:	or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)