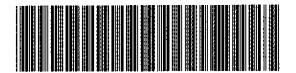
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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COVER LETTER

TO:	Registration Division of C					
SUBJI	E CT:	Li)G G	Group, LLC		
30.55		Name of Limit				
The en	closed Articles	of Organization and fee(s) are	submitt	ed for filing.		
Please	return all corres	pondence concerning this mat	ter to th	e following:		
				e Glee	· · · · · · · · · · · · · · · · · · ·	·
			Name	ot Person		
		G		oup, LLC		
			rim/C	Company		
		6755		lover Circle		···
			Ad	dress		
				e, FL 32317		
			•	and Zip Code		
•		E-mail address: (to be used	glee@ for future	Daol.com e annual report notifi	cation)	
For fur	ther information	n concerning this matter, pleas	e call:			
		ose Glee	_ at (850 ₎		64-7891
	Name	e of Person		Area Code & Day	ime Telep	phone Number
Enclo	sed is a check:	for the following amount:				
] \$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□ _{Ce}	55.00 Filing Fee ortified Copy Iditional copy is encl		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street/Courier A Registration Sect Division of Corp Clifton Building 2661 Executive Tallahassee, FL	ion corations Center C	

ARTICLES OF ORGANIZATION FOR F	LORIDA LIMITED LIABILITY COMPANY			
ARTICLE I - Name: The name of the Limited Liability Company is	s:			
(Must end with the words "Limited Liab	p, LLC			
(Must end with the words "Limited Liab	ility Company," "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liability Company is			
Principal Office Address:	Mailing Address:			
6755 Landover Circle	6755 Landover Circle			
Tallahassee, Florida 32317	Tallahassee, Florida 32317V			
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regibusiness entity with an active Florida registration.) The name and the Florida street address of the	istered Agent. You must designate an individual or another			
Verdell				
Name	e			
4200 EI				
Florida street address (P.C				
Tallahassee, FL 3231 City, State,				
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of a performance of my duties, and I am familiar with and tistered agent as provided for in Chapter 608, F.S			
Registered Agent's Signa (CONTIN	NUED)			
·	FLORIDA OR 12: 43			

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:

"MGR" = Manag		Name and Address:	
"MGRM" = Mar	naging Member		
Manager		Rose Glee	
		6755 Landover Cr.	
		Tallahassee, Fl. 32317	
Managing Men	nber	Donna Mobley	
		7298 Wintercreek Lane	
		Tallahassee, FL 32309	
			
		·	
(Use attachment	if necessary)	-	
(Use attachment LE V: Effective fective date is lis days after the da	date, if other than the	e date of filing:January 14, 20 be specific and cannot be more th	010 (OPTIONA an five business da
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