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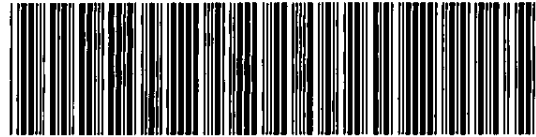
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 MAR 26 AM 11:04

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D. BRUCE

MAR 29 2010

EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** ALPINE PARTNERS LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAUL MAGNIE  
Name of Person

SADDLE HILL PROPERTIES LLC  
Firm/Company

1141 TAYLOR AVE  
Address

DUNEDIN FL 34698  
City/State and Zip Code

C.MAGNIE@TAMPABAY.RR.COM.  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL MAGNIE at ( 727 ) 455-3353  
Name of Person Area Code & Daytime Telephone Number

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- \$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**  
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 of Alpine Partners LLC

The undersigned person(s), acting as Organizer(s) for the purpose of forming a business limited liability company under the laws of the State of Florida, adopt(s) the following Articles of Organization:

**Article 1.** The name of the limited liability company is Alpine Partners LLC

**Article 2.** The principal place of business of the company is 1141 Taylor Ave, Dunedin Florida 34698

**Article 3.** The address of the office of the registered agent of this limited liability company is 1141 Taylor Avenue, City of Dunedin, in the County of Pinellas, State of Florida.

**Article 4.** The names and addresses of the initial members of this limited liability company are as follows:

<i>Name</i>	<i>Address</i>
Saddle Hill Properties LLC	1141 Taylor Ave, Florida 34698
Chris Gurney	3385 Clarine Way East, Florida 34698
Ben Magnie	1141 Taylor Ave, Florida 34698
Carla Reynolds	17 Willow Ridge Drive Smithtown NY 11787
Steve Magnie	9931 Amanita Ave Tujunga CA 91042

**Article 5.** The effective date of this limited liability company is March 30, 2010 and the duration shall be perpetual.

**Article 6.** The initial registered agent of this limited liability company is Paul Magnie. By his or her signature at the end of this document, this person acknowledges acceptance of the responsibilities as registered agent of this limited liability company.

**Article 7.** The purpose for which this limited liability company is organized is to transact any and all lawful business for which limited liability companies may be organized under the laws of the State of Florida, and to have all powers that are afforded limited liability companies under the laws of the State of Florida.

**Article 8.** The company will be managed by the member, Saddle Hill Properties LLC

**Article 9.** The company reserves the right to admit new members at any time.

**Article 10.** The company reserves the right to continue without dissolution, under the terms as set forth in the company Operating Agreement, upon any act that might otherwise cause the dissolution of the company or the dissociation of a member under the laws of the State of Florida.

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Article 11. The Federal Employer Identification Number of the company is 27-2168079.

Article 12. This limited liability company adopts the following additional articles:  
An Operating Agreement will be created to govern the details of the LLC.

I certify that all of the facts stated in these Articles of Organization are true and correct and are made for the purpose of forming a business limited liability company under the laws of the State of Florida.

Dated: 3/24, 20 10

*Paul Magnie*                      PAUL MAGNIE  
Signature of Organizer              Printed Name of Organizer

I acknowledge my appointment as registered agent of this limited liability company and accept the appointment.

Dated: 3/24, 20 10

*Paul Magnie*                      PAUL MAGNIE  
Signature of Registered Agent      Printed Name of Registered Agent

State of FLORIDA  
County of PINEHILLS

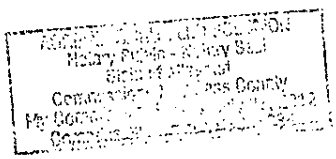
Before me, on March 24, 20 10, personally appeared Paul G. Magnie, N/A, and N/A, named as the organizers, who are known to me to be the person who subscribed his or her names to this document, and acknowledged that he or she did so for the purposes stated.

*[Signature]*  
Signature of Notary Public

Notary Public, In and for the County of MISS  
State of Missouri

My commission expires: July 23, 2012

Notary Seal



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CLERK OF THE COURT  
HALLAMASSE, FLORIDA