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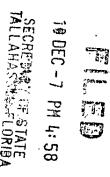
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EXAMINER



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COVER LETTER

TO:

Registration Section

Division of Corporations			
SUBJECT: THE KARIDES GROU	Р		
SCALUT:	ed Liability Compa	ny	
The enclosed Articles of Organization and fee(s) are	submitted for filing	; ,	
Please return all correspondence concerning this mat	ter to the following:	:	
DIMITRI KARIDES			
DIMITITIONIDES	Name of Person		110-28
	Fi- /C		
	Firm/Company		
1400 GULF BLVD., #604			•
	Address		
CLEARWATER BEACH, FL	33767		
	ty/State and Zip Code		
dkarides@tampabay.rr.com			
E-mail address: (to be used	for future annual repo	rt notification)
For further information concerning this matter, pleas	e call:		
Dimitri Karides	at (727	421-811	0
Name of Person		& Daytime T	elephone Number
Enclosed is a check for the following amount:			
\$125.00 Filing Fee & Certificate of Status	Certified Copy Certificate of State (additional copy is enclosed) Certified Copy		\$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	Registrati Division Clifton B 2661 Exe	ourier Addresson Section of Corporation wilding secutive Centers Sec. FL 3230	ons r Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Δ	RT	CI	F	J.	. No	me:
^			4 2			

The name of the Limited Liability Company is:

THE KARIDES GROUP, L.L.C.

(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:		
1400 Gulf Blvd., #604	Same		
Clearwater Beach, FL 33767			

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:

Dimitri Karides	
Nan	ne
1400 Gulf Blvd.,	#604
Florida street a	address (P.O. Box <u>NOT</u> acceptable)
Clearwater Beach,	_{FL} 33767
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 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: Title: "MGR" = Manager "MGRM" = Managing Member MGRM Dimitri Karides 1400 Gulf Blvd., #604 Clearwater Beach, FL 33767

ARTICLE V: Effective date, if other than the date of filing: _______ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

(Use attachment if necessary)

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Dimitri Karides

Typed or printed name of signee

Filing Fees:

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