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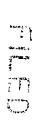
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COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: Pegasus Legal and Protective Resources, 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: James A. Williams Name of Person Pegasus Legal and Protective Resources, LLC Firm/Company 7255 Lake Drive Address Fort Myers, Florida 33908 City/State and Zip Code Jameswilliams15@mac.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Eduardo R. Walton Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: **✓**\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) 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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pegasus Legal and Protective Resources, 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:
7255 Lake Drive	7255 Lake Drive
Fort Myers, Florida 33908	Fort Myers, Florida 33908

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:

Eduardo R. Walton	
Nar	ne
518 Orange Driv	ve # 10
Florida street	address (P.O. Box NOT acceptabl
Altamonte Springs	_{FL} 32714
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.

and agree to act in this capacity. I further agree to comply with the provisions of all to the proper and complete performance of my duties, and I am familiar with and ligations of my position as registered agent as provided for in Chapter-608, E.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>	
"MGR" = Manager	
"MGRM" = Managing Memb	Der .
MGR	Eduardo R.Walton
	518 Orange Drive #10
	Altamonte Springs, Florida 32714
MCD	
MGR	James A. Williams
	7255 Lake Drive
	Fort Myers, Florida 33908
	+ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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