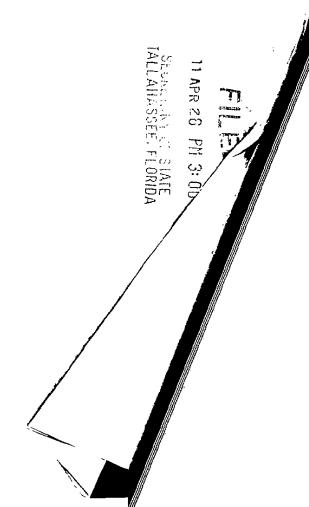
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### **COVER LETTER**

10:	Registration Section Division of Corporations						
SUBJE		Programmi me of Limited Liab					
The end	closed Articles of Organization ar	nd fee(s) are submitte	ed for filing.				
Please 1	return all correspondence concern	ing this matter to the	e following:				
	Larry R. Weinste						
	-	Name o	f Person				
_	Transparent Prog	gramming	LLC				
		Fi <del>rm</del> /C	ompany	-	<u> </u>	^	
	404 Kelly Planta	tion Dr. Ur	nit 906	ŗ		A-	(mg
•		Ado	lress		NS.	₹ 28 8	oner.
	Destin, FL 32541				T1- C		1
•	emaillrw@cox.net	City/State a	nd Zip Code		STAT FLORI	P4 3: 0	_
_	E-mail address	: (to be used for future	annual report notification	)	D A		
For furt	ther information concerning this r	natter, please call:	•				
Larry	R. Weinstein	at (8	50 , 228-13	98			
	Name of Person		Area Code & Daytime To	elephone Number			
Enclos	ed is a check for the following	amount:					
\$125.00	Filing Fee \$\square \frac{\sqrt{\sq}}\sqrt{\sq}}}}}}}}\sqrt{\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	of Status Ce	55.00 Filing Fee & rtified Copy ditional copy is enclosed)	\$160.00 Filin Certificate of Certified Cop (additional copy	Status o		
	Mailing Addr Registration S Division of C P.O. Box 632 Tallahassee, F	ection orporations 7	Street/Courier Addre Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle			

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICI	EI-	Name:
--------	-----	-------

The name of the Limited Liability Company is:

## Transparent Programming 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:			
404 Kelly Plantation Dr. Unit 906 Destin, FL 32541	404 Kelly Plantation Dr. Un Destin, FL 32541	it 906_		
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its ov business entity with an active Florida registration.)	wn Registered Agent. You must designate an individ	Signature	:	
The name and the Florida street address of	of the registered agent are:	7 	730	
Larry R. Weinste	ein	H.	1 APR	3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	Name	87년 87년 87년	22	Tarana Persona
404 Kelly Plantat	ion Dr. Unit 906	m <sub>S</sub>	<u>=</u>	
Florida s	treet address (P.O. Box NOT acceptable)	FL0	بن	Service of
Destin	<sub>51</sub> 32541	TATE ORIE		

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "MGR" = Manager "MGRM" = Managing Men	Name and Address:
MGRM	Larry R. Weinstein
	404 Kelly Plantation Dr. Unit 906
	Destin, FL 32541
	00 CO
(Use attachment if necessary	than the date of filing: (OPTIONAL)
CLE V: Effective date, if other	r than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days prior
CLE V: Effective date, if othe effective date is listed, the date	than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days prior )
CLE V: Effective date, if other effective date is listed, the date 90 days after the date of filing REQUIRED SIGNATURE	than the date of filing: (OPTIONAL)  e must be specific and cannot be more than five business days prior  :
CLE V: Effective date, if other effective date is listed, the date 90 days after the date of filing REQUIRED SIGNATURE	than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days prior )
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CLE V: Effective date, if other effective date is listed, the date 90 days after the date of filing REQUIRED SIGNATURE Signature at (In accordance with constitutes an affirm I am aware that any constitutes a third determined in the constitutes at the determined in the constitutes at the determined in the constitutes at the constitutes	than the date of filing:  e must be specific and cannot be more than five business days prior  c:  a member or an authorized representative of a member.  ection 608.408(3), Florida Statutes, the execution of this document ation under the penalties of perjury that the facts stated herein are true. Talse information submitted in a document to the Department of State
CLE V: Effective date, if other effective date is listed, the date 90 days after the date of filing REQUIRED SIGNATURE Signature at (In accordance with constitutes an affirm I am aware that any constitutes a third determined in the constitutes at the determined in the constitutes at the determined in the constitutes at the constitutes	than the date of filing: (OPTIONAL)  e must be specific and cannot be more than five business days prior  ::  A Community  f a member or an authorized representative of a member.  section 608.408(3), Florida Statutes, the execution of this document ation under the penalties of perjury that the facts stated herein are true. Talse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.)
CLE V: Effective date, if other effective date is listed, the date 90 days after the date of filing REQUIRED SIGNATURE Signature at (In accordance with constitutes an affirm I am aware that any constitutes a third determined in the constitutes at the determined in the constitutes at the determined in the constitutes at the constitutes	r than the date of filing: