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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. C. C. JUN 18 2012

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June 13, 2012

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Extremity Resources, L.L.C.

Dear Sir/Madam:

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

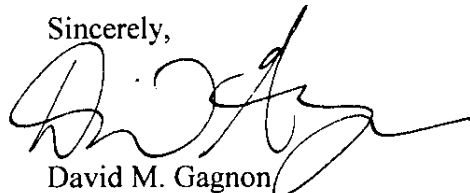
Please return all correspondence concerning this matter to the following:

Algernon M. Pettit, III
272 Deer Run Lane
Ponte Vedra Beach, FL 32082
andyymp@aol.com

For further information concerning this matter, please call Algernon Pettit, III at (904) 616-5449. Enclosed is a check in the amount of \$130 for the Filing Fee and Certificate of Status.

Please do not hesitate to contact me if you have any questions or concerns.

Sincerely,



David M. Gagnon

DMG/tmp
Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Extremity Resources, 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:

272 Deer Run Lane

Ponte Vedra Beach, FL 32082

Mailing Address:

same

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:

David Gagnon, Esquire

Name

50 N. Laura St., Ste. 3500

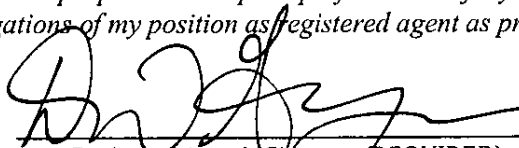
Florida street address (P.O. Box **NOT** acceptable)

Jacksonville, FL 32202

City, State, and Zip

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12 JUN 15 PM 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

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

Name and Address:

MGR

Algernon M. Pettit, III

272 Deer Run Lane

Ponte Vedra Beach, FL 32082

MGRM

Jean B. Pettit

272 Deer Run Lane

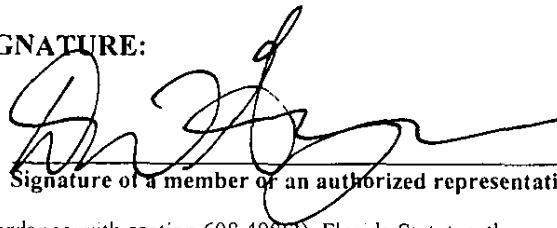
Ponte Vedra Beach, FL 32082

(Use attachment if necessary)

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:



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.)

David M. Gagnon, Esq.

Typed or printed name of signer

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)

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12 JUN 15 PM 12:03
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TALLAHASSEE, FLORIDA