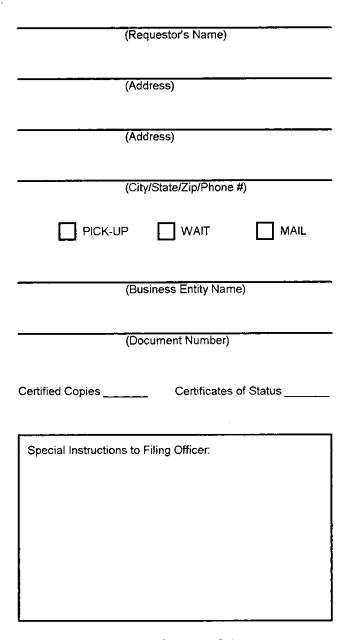
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EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

XELA ENTERPRISES 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:

ALEX LECOUNT Name of Person Firm/Company 1200 NE MIAMI GARDENS DRIVE APT 216 Address **MIAMI FL 33179** City/State and Zip Code AFLECOUNT@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ALEX LECOUNT Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$160.00 Filing Fee, □\$155.00 Filing Fee & □\$130.00 Filing Fee & **■**\$125.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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

The name of the Limited Liability Company i	.		
XELA ENTERPRISES LLC			
(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Li	iability Company is:	
Principal Office Address:	Mailing Address:		
1200 NE MIAMI GARDENS DR APT 216	1200 NE MIAMI GARDENS DR APT 216		
MIAMI FL 33179	MIAMI FL 33179		
ARTICLE III - Registered Agent, Register The Limited Liability Company cannot serve as its own Registerest entity with an active Florida registration.)	ed Office, & Registered Agent's gistered Agent. You must designate an indiv	s Signature:	
The name and the Florida street address of the	zistered Agent. You must designate an indiv	idual or another	
The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	gistered Agent. You must designate an indiv	ridual or another	
The Limited Liability Company cannot serve as its own Regularises entity with an active Florida registration.) The name and the Florida street address of the ALEX LECOUNT Name	gistered Agent. You must designate an indiver e registered agent are:	ridual or another	
The Limited Liability Company cannot serve as its own Regional business entity with an active Florida registration.) The name and the Florida street address of the ALEX LECOUNT Name 1200 NE MIAMI GARDENS DR	e registered agent are:	ridual or another	
The Limited Liability Company cannot serve as its own Regularization business entity with an active Florida registration.) The name and the Florida street address of the ALEX LECOUNT Name of the ALEX LECOUNT Florida street is the ALEX LECOUNT of the ALEX LECO	e registered agent are: APT 216 address (P.O. Box NOT acceptable)	ridual or another	
The Limited Liability Company cannot serve as its own Regulariness entity with an active Florida registration.) The name and the Florida street address of the ALEX LECOUNT Name 1200 NE MIAMI GARDENS DR Florida street a MIAMI	e registered agent are:	idual or another	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

"MGRM" = Managing Member	
WCD.	ALEX LECOUNT
MGR	1200 NE MIAMI GARDENS DR APT 216
	MIAMI FL 33179
	MINIMITE 33173
	<u> </u>
	P: '
	Service of the servic
	75 (a)
	73.
Use attachment if necessary)	ORIO
• /	*v*
EV: Effective date, if other than the	ne date of filing: (OPTIO
fective date is listed, the date mu	st be specific and cannot be more than five bu
or 90 days after the date of filing.)	
REQUIRED SIGNATURE:	
	ber or an authorized representative of a member.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ALEX LECOUNT

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee

constitutes a third degree felony as provided for in s.817.155, F.S.)