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Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
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STURETARY OF STATE
TALLAHASSEE, FLORID.

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Colbert Ventures, 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:
Leslee F Colbert
Name of Person
Firm/Company
19 Forest Lane
Largo Florida, 33773 City/State and Zip Code
lesleecolbert1@yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Leslee F Colbert 557-5024
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\frac{1}{2}\$125.00 Filing Fee \$\frac{1}{2}\$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$\frac{1}{2}\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
Mailing Address Street/Courier Address Registration Section Registration Section

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Colbert Ventures, LLC			
	(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ad			
The mailing address	ss and street address of the pr	rincipal office of the Limited Liability Company is:	
Principal Office Address:		Mailing Address:	
19 Forest Lane		19 Forest Lane	
Largo, FL 33773		Largo, FL 33773	
	ntity with an active Florida re	•	
The name and the I	Florida street address of the r		
The name and the		Name	
The name and the	Lesiee F Colbert 19 Forest Lane	Name	
The name and the i	Lesiee F Colbert 19 Forest Lane		
The name and the	19 Forest Lane Florida street address (Name (P.O. Box <u>NOT</u> acceptable) FL 33773	
The name and the I	19 Forest Lane Florida street address (Name (P.O. Box <u>NOT</u> acceptable)	
Having been name the place desig capacity. I furthe	Leskee F Colbert 19 Forest Lane Florida street address (Largo, City ed as registered agent and to a nated in this certificate, I here er agree to comply with the pr	Name (P.O. Box <u>NOT</u> acceptable) FL 33773	ee to act in this lete performance

(CONTINUED)

Page 1 of 2

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SECRETARY OF SIAFE
TALL AHASSET ELEMEN

Use attachment if necessary) V: Effective date, if other than the date of filing:	Title:		me and Address:		
Use attachment if necessary) V: Effective date, if other than the date of filing:		Member			
Use attachment if necessary) 2. V: Effective date, if other than the date of filing: (OPTIONAL) 1. Citive date is listed, the date must be specific and cannot be more than five business days prior to or 90 of filing.) 2. VI: Other provisions, if any. 2. VI: Other provisions, if any. 3. Signature of a member or an authorized representative of a member. (Intercordance with section 605.0203 (1) (b), 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.) 1. Lestee F Colbert, Manager Typed or printed name of signee 1. Filling Fees: 1. Signature of Articles of Organization and Designation of Registered Agent	MGR - Manager	fe	siee F Colbert		
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