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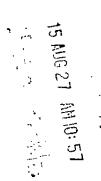
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COVER LETTER

	tration Section on of Corporations		
SUBJECT: _	2623 Seville L	mited Liability Company	
The enclosed A	urticles of Organization and fee(s) as	re submitted for filing.	
Please return al	l correspondence concerning this m	atter to the following:	
_	Robert	J. PADLETT Name of Person	
		Firm/Company	
•	1450 Monte	Carlo Dr	
<u></u>	1450 Monte	Address	
	Clearwater	FL 33764	
-,,	L 1 - 1 - 10	EL 33764 City/State and Zip Code he tmail: con d for future annual report notification	
<u></u>	E-mail address: (to be use	d for future annual report notification	on)
For further infor	mation concerning this matter, pleas		
Ro	bert-PadgeU at (727 (608.76) Area Code Daytime Telephone	2 Number
Enclosed is a c	heck for the following amount:		
\$125.00 Filing	Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street Address	

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

New Filing 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:			3 # C
26	23 Seville	UC		The second
	th the words "Limited Liabi	 	C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address	ress of the principal office o	of the Limited Liabili	ity Company is:	. <u> </u>
<u>Principal</u>	Office Address:		Mailing Address:	
1450 Monte	carlo Dr c, El 33769	145	o Monte Carr pruper, FC	10 Dr 13764
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an acti	nnot serve as its own Regis			. or
The name and the Florida street add	dress of the registered agent RobertT Nam	are:	•	
	1450 Mont	e Carlo	Dr.	
	Florida street address (P.O.	-	=	
-	Cleprosto	State	33764 Zip	
Having been named as registered age place designated in this certificate, I l further agree to comply with the prov am familiar with and accept the oblig	hereby accept the appointme isions of all statute <mark>s relating</mark>	ent as registered ager to the proper and co	nt and agree to act in this c complete performance of my	apacity. I duties, and I
	Registered A	agent's Signature (R)	EQUIRED)	

(CONTINUED)

Page 1 of 2

•	zed to manage and control the Limited Lia	
Title: "AMBR" = Authorized Member	Name and Address:	AUG 27
"MGR" = Manager		· · · · · · · · · · · · · · · · · · ·
MOR	Robert J. Pad.	get 5
	Clearwater FI 3271	10 pc.
AMBR	Erin Palgott	
	Clearner, Pl	2764
(Use attachment if necessary)		
TICLE V: Effective date, if other than the date of fil	r	(OPTIONAL)
an effective date is listed, the date must be specific date of filling.) ite: If the date inserted in this block does not meet t	and cannot be more than five business of the applicable statutory filing requirement	days prior to or 90 days a
document's effective date on the Department of Sta	ate's records.	
TICLE VI: Other provisions, if any.		
		· · · · · · · · · · · · · · · · · · ·
DECLUDED CYCLY MAIDE		
REQUIRED SIGNATURE:) TM	,
	y or an authorized representative of a	nambar
Signature of a member This document is executed in	r or an authorized representative of a ran accordance with section 605.0203 (1) (b), Florida Statutes.
Signature of a member This document is executed in I am aware that any false info	n accordance with section 605.0203 (1) (bormation submitted in a document to the D), Florida Statutes.
Signature of a member This document is executed in I am aware that any false info constitutes a third degree felo	n accordance with section 605.0203 (1) (bornation submitted in a document to the Dony as provided for in s.817.155, F.S.), Florida Statutes.
Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree feloop Robert	n accordance with section 605.0203 (1) (bornation submitted in a document to the Dony as provided for in s.817.155, F.S.), Florida Statutes.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)