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(Re	equestor's Name)	
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TALLAHASSEE FLORIDA

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	HIGHLAND RENTAL LLC
SUBJE	Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	CHRIS SANTE
	Name of Person
	Firm/Company
	P.O. BOX 373006
	Address
	KEY LARGO, FL 33037
	City/State and Zip Code CSANTE@BELLSOUTH.NET
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
	CHRIS SANTE 305 451-5880
	Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
\$125.0	O Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \ \text{Certified Copy (additional copy is enclosed)} \ Certified Copy (addit
	M W A I I

Mailing Address

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

Street Address

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:		
HIGHLAND RENTA		11.12. 0	W. J. G. N. W. J. G. N.
(Must end v	with the words "Limited	Liability Company	/, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	dress of the principal c	office of the Limited	Liability Company is:
<u>Principa</u>	l Office Address:		Mailing Address:
300 ATLANTIC DRI	VE	<u>P.O.</u>	BOX 373006
UNIT 10		KEY	/ LARGO, FL 33037
KEY LARGO, FL 33	037		
ARTICLE III - Registered Ages (The Limited Liability Company another business entity with an action of the name and the Florida street a	cannot serve as its own ctive Florida registration	Registered Agent. on.)	nt's Signature: You must designate an individual or
	CHRIS SANTE		
		Name	
	300 ATLANTIC DR	IVE, UNIT 10	
	Florida street addres	s (P.O. Box NOT a	cceptable)
	KEY LARGO	FL	33037
	City	State	7in

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 605, F.S..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

16 HAY 31 PH 6: 12
SECRETARY OF STATE
OF A STATE

<u>Title:</u>		Name and Address:
	Authorized Member	
"MGR" = Ma		OVERVO GANTER
MGRM		CHRIS SANTE
		P.O., BOX 373006
		KEY LARGO, FL 33037
MGRM		PAMELA SANTE
MORM	<u></u>	P.O. BOX 373006
		KEY LARGO, FL 33037
		Not britted, to 35057
MGR		MICHAEL STANLEY
		P.O. BOX 373006
		KEY LARGO, FL 33037
		RET DARGO, I B 33037
	ent if necessary)	of filing:(OPTIONAL)
LE V: Effective factive date is cof filing.) If the date inserument's effecti	ve date, if other than the date listed, the date must be sp	meet the applicable statutory filing requirements, this date will not be listed
LE V: Effective date is e of filing.) If the date inserument's effecti	re date, if other than the date listed, the date must be sported in this block does not rove date on the Department provisions, if any.	meet the applicable statutory filing requirements, this date will not be listed of State's records.
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LE V: Effective date is e of filing.) If the date inserument's effecti	re date, if other than the date listed, the date must be sported in this block does not rever date on the Department provisions, if any. Signature of a match this document is execused a match that any false constitutes a third degree.	meet the applicable statutory filing requirements, this date will not be listed of State's records. State's records. ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes.
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ARTICLE IV-

Page 2 of 2

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

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) TECRETARY OF SINIE