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COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	Langham RE Holdings, LLC		
SOBJEC	Name of Limited Liability Company		
The enclo	osed Articles of Organization and fee(s) are submitted for filing.		
Please ret	turn all correspondence concerning this matter to the following:		
	James W. Langham		
	Name of Person		
	Firm/Company		
	12 Meeker Road		J.,
	Address	16 S	
	Westport, CT 06880	SEP 12	:
	City/State and Zip Code jwlangham@yahoo.com	2 611 7: 14	٠)
	E-mail address: (to be used for future annual report notification)		7 (4)
For further	information concerning this matter, please call:	#	122 120 24
	James W. Langham 203 912-4826		
	Name of Person Area Code Daytime Telephone Number		
Enclosed	is a check for the following amount:		
\$125.00	Filing Fee \$\ \times \text{\$130.00 Filing Fee & Certificate of Status} \tag{\$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \tag{\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}		
	Mailing Address New Filing Section Street Address New Filing Section		

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	y Company is:			
Langham RE Holding				
(Must end	with the words "Limited L	iability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	ddress of the principal offi	ce of the Limited L	iability Company is:	
Principa	al Office Address:		Mailing Address:	
c/o Samuel A. Langh	am	c/o Sa	muel A. Langahm	
138 32nd Avenue So			2nd Avenue South	
Jacksonville Beach, I	Florida 32250	Jackso	onville Beach, Florida 32250	
The name and the Florida street a	Samuel A. Langham	Name		
	Florida street address (ceptable)	
	Jacksonville Beach	Florida	32250	
	City	State	Zip	
Having been named as registered a place designated in this certificate, further agree to comply with the propertion amiliar with and accept the ob	I hereby accept the appoint ovisions of all statutes relating all gations of my position as	ntment as registered ting to the proper a	d agent and agree to act in this cound complete performance of my	apacity. I duties, and I

(CONTINUED)

Page 1 of 2

	<u>Title:</u> "AMBR" = Authorized	Name and Address: I Member		
	"MGR" = Manager	0		
	AMBR	Samuel A. Langham 138 32nd Avenue South		
		Jacksonville Beach, Florida 32250		
	AMBR	James W. Langham		
	AIMBR	12 Meeker Road		
		Westport, CT 06880		
	-			
	(Use attachment if nece			
	(Ose attachment if fices	coomy)		
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The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-