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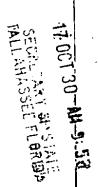
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COVER LETTER

TO:	New Filing Section Division of Corporations
	DEER ENGINEERING SOLUTIONS, LLC
SUBJE	CT:Name of Limited Liability Company
The end	closed Articles of Organization and feets) are submitted for filing.
Please i	return all correspondence concerning this matter to the following:
	Margot Pequignot, Esq.
	Name of Person
	Margot Pequignot, P.A.
	Firm/Company
	P.O. Box2497
	Address
	Largo, FL 33779-2497
	City/State and Zip Code marpeq@aol.com
	E-mail address: (to be used for future annual report notification)
for furth	er information concerning this matter, please call:
	Margot Pequignot 727 518-7330 at ()
	Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
]\$125,0	O Filing Fee \$\int \text{\$130.00 Filing Fee & Certificate of Status}\$\int \$155.00 Filing Fee & Certificate of Status & C
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DEER ENGINEERING SOLUTIONS, LLC (Must contain the words "Limited I	liability Company, "L.L.C.," or "LLC,")
LE II - Address: iling address and street address of the principal of	Dice of the Limited Liability Company is:
Principal Office Address:	Mailing Address
	12717 98th St. N.
12717 98th St. N.	12117 //////
12717 98th St. N. Largo, FL 33773	Lsrgo, FL 33773

Margot Pequignot

Name

164 8th Ave. SW

Florida street address (P.O. Box NOT acceptable)

Largo FL 33770
City State Zip

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. Thereby 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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	
AMBR	KATHLEEN DEER
	12717 98th St. N.
	Largo, FL 33773
	
•	
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Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)