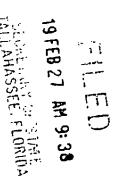
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## **COVER LETTER** TO: **New Filing Section Division of Corporations** The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: drian D. Haughton upton Resque Lot Arenue Sont Patrick o have hton @ live. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Marian C. May Arra (727) 564 8013 Name of Person J Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$130.00 Filing Fee & \$155.00 Filing Fec & \$160.00 Filing Fcc. 25.00 Filing Fee Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street Address Mailing Address New Filing Section **New Filing Section** Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: 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)

istered Agent's Signature (REQUIRED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Adrian O. Haughton  3018 Lm Avenue Smt. St. Peters biss. Fr 33712
	St. peters birg, Fr 334 12
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