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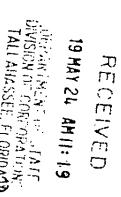
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COVER LETTER

TO:

New Filing Section

Division of Corporations			
SUBJECT: D.B.D., Derth Before Dis Honor (IC Name of Limited Liability Company			
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Devin Brown, Ronnie Johnson, Richy Peterson,			
Blail Stevens			
2502 Holton St 147 apt. Address			
T _{C1} 11, FL, 32310 City/State and Zip Code			
City/state and zap code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
The state of the s			
Perin Brown at (32310) 850-322-0401			
Name of Person Area Code Daytime Telephone Number			
Enclosed is a check for the following amount:			
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee. Certified Copy (additional copy is enclosed)			
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			
Tallahassee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability	Company is:	
	The Bofore Distantiate Control of the Words "Limited Liability Control of the Con	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street add	iress of the principal office of th	ne Limited Liability Company is:
Principa!	l Office Address:	Mailing Address:
2502 HoHan 32310 cp	3+, Tall, A.,	Same
ARTICLE III - Registered Ager	nt. Registered Office. & Regist	tered Agent's Signature:
(The Limited Liability Company of another business entity with an ac	cannot serve as its own Register ctive Florida registration.)	ed Agent. You must designate an individual or
(The Limited Liability Company of	ctive Florida registration.)	ed Agent. Tou must designate att man veeste
(The Limited Liability Company of another business entity with an ac	ctive Florida registration.)	ed Agent. Tota musi designate an morried
(The Limited Liability Company of another business entity with an ac	ddress of the registered agent ar Rennic Johnson	lazer de
(The Limited Liability Company of another business entity with an ac	ddress of the registered agent ar Ronnic Johnson Name	lazer de

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)

2010 HAY 23 PM II: 07

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
4MBR	Run Brown 2502 Hollonst July FL, 32310 upt 147
AMIBR	Ronnie Johnson 2507, Holton st
	Tall, FC, 32310 apt 147
MGR	Kicky leterson 2502 Hoton St Tall, FL. 32310 apt 147
·	
(Use attachment if necessary)	0: -1
the date of filing \	e specific and cannot be more than five business days prior to or 90 days after of meet the applicable statutory filing requirements, this date will not be listed a
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
<u> </u>	Johnson
Signature of: This document is explained any aware that any	a member or an authorized representative of a member. Elected in accordance with section 605.0203 (1) (b), Florida Statutes, false information submitted in a document to the Department of State egree falony as provided for in s.817.155, F.S.
_ Keim	Typed or printed name of signee

Filing Fees:

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

ARTICLE IV-

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