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	(Requestor's Name)
	(Address)
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	(City/State/Zip/Phone #)
PICK-UP	P MAIL MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:

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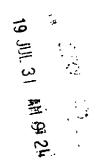
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WHENT OF STATE

Division of Corporations
SUBJECT: Eugene Forbes L. L. C. 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:
Eugene Forbes Jr. Name of Person
Le Roy Circle 9459
Tallahassee Fl. 32308
Tallahassee Fl. 32308 City/State and Zip Code Eugene Forbes 40 Q gma. 1. Com E-mail address: (to be used for future abdual report notification)
For further information concerning this matter, please call:
Tonya at (\$50) 405-23-41 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \] \[\begin{align*} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \] \[\text{S160.00 Filing Fee. & Certified Copy (additional copy is enclosed)} \] \[\text{Certified Copy (additional copy is enclosed)} \]
Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Taliahassee, 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 1 - Name: The name of the Limited Liability Company is:
Eugene Forbes L.L.C. (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
LeRoy Circle 9459
Tall4h955cc Fl. 32308
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:
Eugene Forbes Jr. LeRoy Circle 9459
Le Roy Circle 9459 Florida stroy address (P.O. Box NOT acceptable)

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.

Eugine Fother Jv.
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Tullahassee F1. 32308
City State Zip

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Eugen Forba J
A. (i)	1 6/160
MGK	LeRoy Circle 9459
	Tullahassee Fl. 32308
	
(Use attachment if necessary)	
LE V: Effective date, if other than the	date of filing:
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Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-