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# COVER LETTER

	ling Section n of Corporations
SUBJECT: _	Registry Publishing, LLC
	Name of Limited Liability Company
The enclosed A	ticles of Organization and fee(s) are submitted for filing.
Please return al	correspondence concerning this matter to the following:
	Ron C. James
	Name of Person
	Registry Publishing, LLC
	Firm/Company
	5163 Velda Dairy Road
	Address
	Tallanassee, Florida 32309
	City/State and Zip Code ronjames2@notmail.com
	E-mail address: (to be used for future annual report notification)
For further inform	ation concerning this matter, please call:
	Ron C. James at ( 850 ) 339-4008
	Name of Person Area Code Daytime Telephone Number
Enclosed is a cl	eck for the following amount:
□\$125.00 Filii	Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314  Street Address New Filing Section Division The Centre of Tallahassee CO Tallahassee, Fl. 32303  Tallahassee, Fl. 32303

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Registry Publishing, LLC	
(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:
5163 Velda Dairy Road	5163 Velda Dairy Road
Tailanassee, Florida 32309	Tailahassee, Florida 32309

# 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:

	Ron C. James	
	Name	
	5163 Velda Dairy Road	
Florida street address	(P.O. Box <b>NOT</b> ac	rceptable)
Tallahassee	Florida	32309
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. 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

. . . .

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Ron C James	
	5163 Velda Dairy Road	
	Tallahassee, Florida 32309	
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