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TRANSMITTAL LETTER FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

700002441727--4 -02/26/98--01074--001 ****293.75 ****293.75

SUBJECT:	VIABLE PRODUCTS L.C.	
	(Proposed limited liability company name - must include suffix)	

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$250.00 Filing fee for Articles of Organization and Affidavit \$ 35.00 Designation of Registered Agent

A letter of acknowledgement will be issued free of charge upon filing. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy is \$52.50 Please send one check for the total amount made payable to the Florida Department of State.

FROM: JEFFREY GITTO

Name (Printed or typed)

Name 3/5/98	14025 FAIRWAY ISLAND DR. # 312
Name 373798 Availability dec	Address
Document DCC Examiner	ORLANDO, FL. 32837
	- City, State & Zip
Updater	
	407-251-1575
Aprifyer DCC	Daytime Telephone number
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY **COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

VIABLE PRODUCTS L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

14025 FAIRWAY ISLAND DR. #312 Orlando, FL 32837 **ARTICLE III - Duration:** The period of duration for the Limited Liability Company shall be: PERPETUAL **ARTICLE IV - Management:** (check and complete the appropriate statement)

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

14025 FAIRWAY ISLAND DR #312 14025 FAIRWAY ISLAND ORLANDO, F1, 32837 Summit DR. DUNEON, FI. 34689 MATTHEW GILLMORE 8307 DAWN DR. ORLANDO, FL. 32809

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

WITHIN ONE WEEK OF tHE DEATH, INSANITY,
BANKRUPTCY, RETIREMENT, RESIGNATION, OR EXPUSSION
OF A MEMBER, ALL REMAINING MEMBERS
OF the LCC MAY Vote to continue
the LEGAL existence of the L.C., in which
CASE THE L.C. SHAII NOT DISSOIVE.

NOTE: If no provisions are to be made in Article V and VI remove this page before submitting for filing with the Department of State.

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The 1	undersigned memb	er or authorized repi	resentative of a	a member of	
	VIABLE	PRODUCTS	L.C.	deposes an	nd says:
1) the a	bove named limite	d liability company	has at least two	o members	36 SE
2) the to	otal amount of cash	contributed by the	member(s) is		\$ 12.00
		of property other the			(s) is \$
4) the a	mount of cash or p	roperty anticipated t	to be contribute	ed by member(s)	5 \$ 4,0∞ .
5) the to	otal amounts of 2,	3 and 4 is			\$ <u>16,000</u> .

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of	the limited liability company is:	
	VIABLE PRODUCTS L.C.	77 SS
		Allower PEB 26
2. The name an	nd address of the registered agent and office is:	
	JEFFREY S. GITTO (NAME)	2: 25 1317 1317 13104
	(NAME)	
_1	4025 FAIRWAY ISLAND DR. # 312 (P. O. BOX NOT ACCEPTABLE)	
	ORLANDO, FL. 32837 (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.

(SIGNATURE) 02/23/98 (DATE)

Filing Fee: \$ 35 for Designation of Registered Agent