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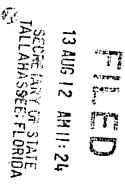
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(City/State/Zip/Phone #)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	\neg
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COVER LETTER

TO: Registration Section Division of Corporations 406AZEELE408, LLC 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: Daniel J. McBreen Name of Person 406 AZEELE408, LLC Firm/Company 600 S. Oregon Avenue Address Tampa, FL 33606 City/State and Zip Code danmcbreen@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Dan McBreen Name of Person Enclosed is a check for the following amount: ■\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing **函数** Certificate of Status Certificate of Status & Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address Street/Courier Address Registration Section Registration Section

Division of Corporations

2661 Executive Center Circle

Clifton Building

- Tallahassee, FL 32301

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	is:	
406AZEELE408, LLC		
	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Lial	bility Company is:
Principal Office Address:	Mailing Address:	
600 S. Oregon Avenue	600 S. Oregon Avenue	
Tampa, FL 33606	Tampa, FL 33606	
		
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the Daniel J. McBreen	gistered Agent. You must designate an individu	ual or another
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600 S. Oregon Avenue Florida street	address (P.O. Box <u>NOT</u> acceptable)	i.u,i<
la,	Nea FL 33606 State, and Zip	AM II: 21 OF STATE E. FLORIG
	•	Su t
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cap all statutes relating to the proper and compand accept the obligations of my position as	in this certificate, I hereby accept the pacity. I further agree to comply with plete performance of my duties, and I	e appointment as h the provisions of I am familiar with
Registered Agent's Sig		
(CONT	INUED)	

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Mer	Name and Address:	
MGRM	Daniel J. McBreen 600 S. Oregon Avenue	
	Tampa, FL 33606	
	4.4	
		
(Use attachment if necessar	у) .	
ARTICLE V: Effective date, if oth (If an effective date is listed, the	er than the date of filing:(OPTIONAl date must be specific and cannot be more than five busines	AL) ss days
prior to or 90 days after the date of	of filing.)	ى ك
REQUIRED SIGNATUR	E:	j j
)J	of a member or an authorized representative of a member.	
	of a member or an authorized representative of a member.	!
constitutes an affirm I am aware that any	nation under the penalties of perjury that the facts stated herein are true. false information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.)	

Daniel J. McBreen Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent \$ 30.00 Certified Copy (Optional)

Filing Fees:

\$ 5.00 Certificate of Status (Optional)