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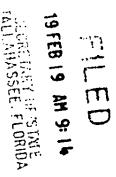
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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COVER LETTER

	New Filing Section Division of Corporations
SUBJEC	Security by Southern, LLC
SUBJEC	Name of Limited Liability Company
The enclo	sed Articles of Organization and fee(s) are submitted for filing.
Please rett	urn all correspondence concerning this matter to the following:
	Michael R Southern
	Name of Person
	Firm/Company
	1920 SW 5th ST Apt 207
	Address
	Fort Lauderdale, FL 33312
	City/State and Zip Code msouthern20@hotmail.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	Michael R Southern 561 201-5999
	Name of Person Area Code Daytime Telephone Number
Enclosed i	is a check for the following amount:
\$ 125.00 F	Filing Fee \$130.00 Filing Fee & Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Street Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Security by Southern, LL	LC			
		Liability Company	, "L.L.C.," or "LLC.")	<u> </u>
ARTICLE II - Address: The mailing address and street addre	ess of the principal of	ffice of the Limite	d Liability Company is:	
Principal O	office Address:		Mailing Address:	
1920 SW 5th ST Apt 207		193	20 SW 5th ST Apt 207	
Fort Lauderdale, FL 333	12	Fo	t Lauderdale, FL 33312	
	not serve as its own	& Registered Agent		- -
	mot serve as its own e Florida registratio	& Registered Agent Registered Agent	ent's Signature:	19 FEB 1
(The Limited Liability Company can another business entity with an activ The name and the Florida street addr	mot serve as its own e Florida registratio	& Registered Agent Registered Agent	ent's Signature:	
(The Limited Liability Company can another business entity with an activ The name and the Florida street addr	mot serve as its own re Florida registration ress of the registered	& Registered Agent Registered Agent	ent's Signature:	EB 19 AM
(The Limited Liability Company can another business entity with an activ The name and the Florida street addr N	mot serve as its own re Florida registration ress of the registered	& Registered Ag Registered Agent in.) I agent are:	ent's Signature:	FEB 1
(The Limited Liability Company can another business entity with an active The name and the Florida street address.) No. 1	mot serve as its own re Florida registratio ress of the registered Michael R Southern	& Registered Ag Registered Agent n.) Lagent are: Name	ent's Signature: You must designate an individual or	EB 19 AM
(The Limited Liability Company can another business entity with an active The name and the Florida street address.) Name	mot serve as its own re Florida registratio ress of the registered Aichael R Southern 920 SW 5th ST Apt	& Registered Ag Registered Agent n.) Lagent are: Name	ent's Signature: You must designate an individual or	EB 19 AM

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)

Titi	₽:	Name and Address:	
-	*** 4BR" = Authorized Memb		
	GR" = Manager	,	
MC		Michael R Southern	
WER		1920 SW 5th ST Apt 207	
		Fort Lauderdale, FL 33312	
		Tort Eadderdale, 1 E 33312	
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		—————————————————————————————————————	-
			, -
(Use	attachment if necessary)		
If an effective he date of file <u>Note:</u> If the	e date is listed, the date r ing.) date inserted in this block	an the date of filing:	-
KHCLE VI	: Other provisions, if any.		
			
REC	DUIRED SIGNATURE:	00 0 0	
	much	all Souther	
	Signatu	re of a member or an authorized representative of a member.	
	This documer	it is executed in accordance with section 605.0203 (1) (b), Florida Statutes.	
	I am aware tha	at any false information submitted in a document to the Department of State	
	constitutes a ti	hird degree felony as provided for in s.817.155, F.S.	
	Michae	el R Southern	
		Typed or printed name of signee	

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

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)