

L04 0000 72047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

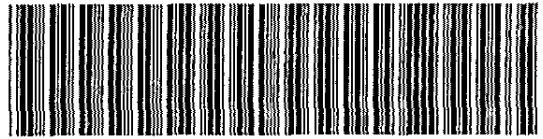
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400041167744

09/30/04--01018--009 **155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 SEP 30 PM 12:40

FILED

L04-72047
OK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1100 East Moody 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:

Mark L. Quinn
(Name of Person)

1100 East Moody LLC
(Firm/Company)

34 Van Doren Ave
(Address)

Somerset, NJ 08873
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark L. Quinn at (732) 672.3019
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 SEP 30 9M 12:40

FILED

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

1100 East Moody LLC

ARTICLE II - Address:

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

Principal Office Address:

34 Van Doren Ave

Somerset, NJ 08873

Mailing Address:

34 Van Doren Ave

Somerset, NJ 08873

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Sidney M. Nowell Esq.

Name

1102 East Moody Blvd

Florida street address (P.O. Box **NOT** acceptable)

Bunnell

FLORIDA 32110

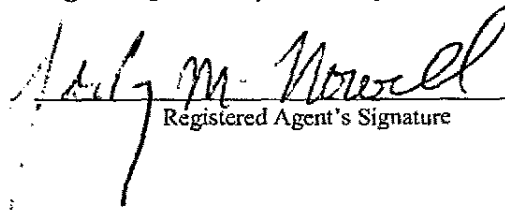
City, State, and Zip

SECRETARY OF STATE
TALAHASSEE, FLORIDA

04 SEP 30 PM 12:40

FILED

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 608, Florida Statutes..



Registered Agent's Signature

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

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

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Mark L. Quinn 34 Van Doren Ave Somerset, NJ 08873
MGRM	Oliver B. Quinn 201 Pemberton Ave Plainfield, NJ 07060
MGRM	Sidney M. Nowell 1102 East Moody Blvd Bunnell, FL 32110

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


Signature of a member of an authorized representative of a member.

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

Mark L. Quinn
Typed or printed name of signee

- Filing Fees:**
- \$100.00 Filing Fee for Articles of Organization
 - \$ 25.00 Designation of Registered Agent
 - \$ 30.00 Certified Copy (Optional)
 - \$ 5.00 Certificate of Status (Optional)

FILED
04 SEP 30 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA