## Phone 813-980-1359 • Fax 813-980-1983

May 31, 2001

Division of Coroirations Post Office Box 6327 Tallahassee, Fl. 32314

**700004339687**---<sup>1</sup> -06/04/01--01068--023 \*\*\*\*155.00 \*\*\*\*155.00

Please find attach submission of Articles of Organization for Florida Limited Liability Company.

**Business Name:** 

Palm Bay Services, LLC

Manager -managed company:

Dorothy White

Address:

7106 Lynwood Drive

Tampa, Fl. 33637

Phone:

813-980-1359

Fax:

813-980-1983

A Check is also attach for Filing Fees:

\$100.00 Filing Fee

25.00 Designation of Registered Agent

30.00 Certified Copy

Total \$155.00

Thank You

Dorothy White

LO1-9122

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

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

LLC

**ARTICLE I - Name:** 

**ARTICLE II - Address:** 

The name of the Limited Liability Company is:.

Dorothy White Drive
TIOU LYNWOOD DRIVE
TAMPA Fl. 33637

PAIM BAY Services

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

ı	Muron	White				
***	n 101/ 111	Name Hollywood ST.				
			<del></del>			
-	TAMPA	ddress (P.O. Box <u>NOT</u> acceptable) FL 33604	1			
		City, State, and 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 608, F.S  Registered Agent's Signature  Article IV - Management (Check box if applicable.)  The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.						
(An addition	al article mus	t be added if an effective date i	is requested)			
Signature	of a member o	ran authorized representative of a	member.	.83	٠.٥	
		on 608.408(3), Florida Statutes, the e				
that the fac	cts stated herein	are true.)		***	72	•
	Dorothi	white		25	158	
**************************************	Type	or printed name of signee	<del></del> - ·		-	
	-	NS1.b 172			ربي	
		<u>Tiling Fees:</u> 100.00 Ijiling Fee for Articles of O	rganization		5	
	(\$	25.00 Designation of Registered A		We (	C.	
	\$	30.00 Certified Copy (Optional)	D			
	3>	5.00 Certificate of Status (Option	a <b>a1)</b>			