## \_0200000 17382

Clearwater, FL 33759 727-669-0854

The Secretary of State **Division of Corporations** Post Office Box 6327 Tallahassee, Florida 32314

Re: Alila, LLC

Dear Sir:

ir: 02-13/87 02-12382Enclosed herewith please find an original executed Articles of Organization for the above referenced LLC, Certificate of Designation Registered Agent/Registered Office, along with our check in the amount of \$125.00 to cover the cost of the following:

> Filing Fee Registered Agent Designation

\$100.00 25.00

Total

\$125.00

Kindly return the Certificate of to me at the above address. Thank you for your attention to this matter.

Very truly yours,

Dimitur Alipiev

**Enclosures** 



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 8, 2002

DIMITUR ALIPIEV ALILA, LLC 3000 GULF TO BAY BLVD., SUITE 200 CLEARWATER, FL 33759

SUBJECT: ALILA, LLC

Ref. Number: W02000013183

We have received your document for ALILA, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles I and II of your form were left blank. Please complete Articles I and II.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 002A00028863



## FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:
The name of the Limited Liability Company is:
ALILA, LLC
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
3000 GULF TO BRY BLUD. 50,76 200
3000 GULF TO BRY BLUD., 50,76 200 CLEARWATER, FL 33759
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
DIMITUR ALIPIEN
Name
Florida street address (P.O. Box NOT acceptable)
CCGANWATER FL 33759 City, State, and Zip
City, State, and Zip
registered agent and agree to act in this capacity. I further agree to comply with the provisions of althouse 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  Registered Agent's Signature
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 additional article must be added if an effective date is requested)
Dit Office
Signature of a member or 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.)
Diminin Dupico
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)