## L03000015125 FILED

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ad                     | dress)             |           |
| (Ad                     | dress)             |           |
| (Cit                    | ry/State/Zip/Phone | e#)       |
| PICK-UP                 | MAIT WAIT          | MAIL      |
| (Bu                     | siness Entity Nan  | ne)       |
| (Do                     | cument Number)     |           |
| Certified Copies        | Certificates       | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |

Office Use Only

LAURLIANT OF STATE I ALLAHASSEE, FLORID



400015443664

04/10/03--01084--008 \*\*155.00

AL!

## LLC Articles Filing Letter

FILED 03 APR 10 AM 10: 36

SCONETARY OF STATE FALLAHASSEE, FLORIDA

Divisions of Corporations 409 E. Gaines Str. Tallahassee, FL 32399

LLC Filings Office:

I enclose an original and 1 copy of the proposed Articles of Organization of ALDEA INTERNATIONAL LLC, a proposed domestic limited liability company. Please file the Articles of Organization and return a file-stamped copy of the original Articles or other receipt, acknowledgment or proof of filing to me at the address below.

A check/money order in the amount of \$155.00, made payable to your office, for total filing and processing fees is enclosed.

Sincerely,

Organizer

JACEK SZYC

4360 Northlake Blvd. Suite 203 Palm Beach Gardens, FL 33410

(561)627-4737

Enclosures: Articles of Organization; check

03 APR 10 AM 10: 36

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY, STATE TALLAHASSEE, FLORIDA

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

ALDEA INTERNATIONAL LLC

## **ARTICLE II - Address:**

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

4360 NORTHLAKE BLVD. SUITE 203 PALM BEACH GARDENS, FL 33410

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

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

| Ç    | JACEK SZYC                                       |
|------|--|
| 4360 | NORTHLAKE BLVD. SUITE 203                        |
|      | Florida street address (P.O. Box NOT acceptable) |
| PALM | BEACH GARDENS, FL 33410                          |
|      | 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.

Rogistered Agent's Signature

(An additional article must be added if an effective date is requested)

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.)

JACEK SZYC

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)