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03 JUL -8 AM 7:52

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LAUGHLIN L	(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s)  Please return all correspondence concerning this	
KENNETT F. LAUGULIA (Name of Person)	
LAUGHUN LILC (Firm/Company)	
K. N. CORAL REEF.	<u>CT,</u> 52
PASEM CONST FL (City/State and Zip Code	<u>32 /37</u> e)
For further information concerning this matter, pl	
(Name of Person)	at ( 386 ) 986 - 3100 (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

Division of Corporations

Tallahassee, Florida 32399

409 E. Gaines Street



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 26, 2003

KENNETH F. LAUGHLIN LAUGHLIN, LLC 15 N CORAL REEF CT. PALM COAST, FL 32137

SUBJECT: LAUGHLIN L.L.C. Ref. Number: W03000018378

O3 JUL -8 AM 7:52

We have received your document for LAUGHLIN L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6097.

Letter Number: 403A00038874

Marsha Thomas Document Specialist

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	•
ARTICLE I - Name:	
The name of the Limited Liability Company is:	LAUGHLIN LLC
,	
ARTICLE II - Address:	
The mailing address and street address of the princip	pal office of the Limited Liability Company is:
15 N. CORAL	
• •	
PALM CARST	FL 32/37
ARTICLE III - Registered Agent, Registered Off	
THE TANK THE MESSES OF THE PROPERTY OF THE	The state of the s
The name and the Florida street address of the regist	ered agent are:
HENDE H 1	F. HAUSALIN SOFT
Na	me
15 N. COR	al REEF CT.
Florida street address (P.C	D. Box NOT acceptable)
PAIM PRAST	O. Box NOT acceptable)
City Stat	FL 32/37 5 8
City, State	o, and exp
liability company at the place designated in this certification registered agent and agree to act in this capacity. If statutes relating to the proper and complete performs accept the obligations of my position as registered agent.	further agree to comply with the provisions of all ance of my duties, and I am familiar with and
Registered	Agent's Signature
· ·	
(An additional article must be adde	d if an effective date is requested)
Tempt Sh	lea
Signature of a member or an author	rized representative of a member.
(In accordance with section 608.408)	(2) Florida Statutos the execution
of this document constitutes an affirm that the facts stated herein are true.)	
Variation C.	Inisaul M
KENNETH F. Typed or printed	name of signee
-1/1- or brusse	

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)