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PICK-UP	WAIT	MAIL MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	

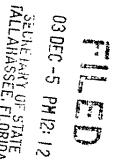
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			•	3	
SUBJECT: Leonard TAY R (Name	ANKAR+2 of Limited Liability Company	<u> </u>			
The enclosed Articles of Organization and fee(	(s) are submitted for filing.				
Please return all correspondence concerning th	is matter to the following:				
LEONARD JAY Blankar	t-2				
(Firm/Company)		• • • • •	SECRE DARY	03 DEC -5 P	
1940 SAWDUST RD (Address)		-	FLORID	PH 12: 12	-
Quincy F/ 3235/ (City/State and Zip Co	ode)		A	<del>7.</del> 1	•
For further information concerning this matter,	please call:				
(Name of Person)	at ()_ (Area Code & Day	time Telephone Numi	per)		
STREET ADDRESS: Registration Section Division of Corporations	MAILING ADDRES Registration Section Division of Corporation				-

P.O. Box 6327

Tallahassee, Florida 32314

409 E. Gaines Street

Tallahassee, Florida 32399

## ARTICLES OF ORGANIZATION FOR FLORIDA LÏMITED LIABILITY COMPANY

office of the Limited Liability Company is:
Mailing Address:
& Registered Agent's Signature:
of agent are:  SECRETARY OF STATE  TALLAHASSEE, FLORIDA  3235/

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..

(CONTINUED)

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

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MCRM	Leonard Jay Blanky tz 1940 Samay De 32351	 	
		-	- - • ·-
	Ass	.03	
	C PARTIES SEE	DEC -5	
(Use attachment if necessary)  NOTE: An additional article must be	added if an effective date is requested.	PM 12: 12	

REQUIRED SIGNATURE:

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.)

Leonaco Tay Blankalt Z 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)