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Special Instructions to	Filing Officer:	
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DIVISION OF CORRORATION

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J. BRYAN DEC 1 5 2003

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: BATIR CHERKEZOV, LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Barie Cherkezov
(Name of Person)
BATIR Cherkezov, LLC
(Firm/Company)
48 Okahatchee Circl
(Address)
Ft. WALTON BEACH, FL 32548
(City/State and Zip Code)
For further information concerning this matter, please call:

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Batil Ckelkezov LC. ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address:

Principal Office Address:	<u>Mailing Address:</u>
48 OkanaTchee Circl	the same address
Ft. WALTON BEACH	
FL 32548	
ARTICLE III - Registered Agent, Registered Offic	ce, & Registered Agent's Signature:
The name and the Florida street address of the registe	
Batir Cheeke	201

48 Okauarckee Cip.

Florida street address (P.O. Box NOT acceptable)

Fl. Walton Beach FL 32547

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

(CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	BOTIR CHERKEZOV 48 OHAHATCHEE CIRCL FT. WALTON BEACH, FL 32548
~ ~	
	OS DEC 15 AM
(Use attachment if necessary) NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	er or am authorized representative of a member.

that the facts stated herein are true.)

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

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)