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FINE PLANT

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Alday Dalla (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:
Vanc of Person)
Alday Dnyhall 10
P.O. Box 1024 Address) Luacea 12 32346 (City/State and Zip Code)
For further information concerning this matter, please call: 1

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:	
Alday Dajuni	, LC
ARTICLE II - Address: The mailing address and street address of the princip	oal office of the Limited Liability Company is:
Principal Office Address: P.O. BOX 1024 Panacea, Florida 32346	Mailing Address:
ARTICLE III - Registered Agent, Registered Off	ice, & Registered Agent's Signature:
The name and the Florida street address of the regist Once Name Horida street address (P.O. Box Florida street address (P.O. Box City, State, and Zi	treet NOT acceptable) 32346
Having been named as registered agent and to acceptiability 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 performancept the obligations of my position as registered agent.	ificate, I hereby accept the appointment as further agree to comply with the provisions of all ance of my duties, and I am familiar with and
Manie Cl C Registered Agent's Sig	gnature $\sum_{i=1}^{\infty}$

(CONTINUED)

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

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

Title:	Name and Address:
"MGR" = Manager	·
"MGRM" = Managing Member	
LGICM	Vance Alday
	P.O. BOX MAL
· · · · · · · · · · · · · · · · · · ·	Printing, FL 90910
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— — — — — — — — — — — — — — — — — — —	
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
1 /ame	Olel man
Signature of a member of	or an authorized representative of a member.

Filing Fees:

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

\$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)