L0400003413

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



300025631433

FILED JAN 13 PM

JAN 13 PN 3-57

DIVISION OF CONCURATION

MX



ACCOUNT NO. : 072100000032

REFERENCE: 393076 81081A

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: January 13, 2004

ORDER TIME : 10:21 AM

ORDER NO. : 393076-005

CUSTOMER NO: 81081A

CUSTOMER: Ms. Malinda Vasquez

Alexander Dambra & Duhl, P.a.

Suite 201

5737 Okeechobee Boulevard West Palm Beach, FL 33417

DOMESTIC FILING

NAME: THUNDERDOWN, L.L.C.

XX ARTICLES OF	'ORGANIZATION
----------------	---------------

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret - EXT. 2949

EXAMINER'S INITIALS:

FOR

ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compa	ny is:
THUNDERDOWN, LLC	•
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6234 S. CONGRESS AVENUE	SAME
LANYANA, FLORIDA 33466	
ARTICLE III - Registered Agent Regis	stered Office, & Registered Agent's Signature:
The name and the Florida street address of	
Grorgiana F. Da	Mane Name
5737 OKERCHOREE 1 Florida street addres	SI.VD., SUITE 201 ss (P.O. Box <u>NOT</u> acceptable)
MEST DATM DEACH	EN COLUMN 32 63 7

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, Florida Statutes ..

City, State, and Zip

Registered Agent's Signature

Page 1 of 2 (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 JULIE PIEPEN 1029-E GREEN PINE BOULEVARD WEST PALM BEACH, FLORIDA 33409 MGRM CHRISTINE KING JAMES 3146 GARDEN LANE Lake Worth, Florida 33461 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE Signature of a member of 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.) BY: GEORGIANA F. DAMBRA Typed or printed name of signee

Filing Fost: \$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)