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TRANSMITTAL LETTER TO: Registration Section Division of Corporations SUBJECT: DRUE REMETA RILEY 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: DIANE REMETA RILEY (Name of Person) DIANE REMETA RILEY (Name of Person) JANE REMETA RILEY LLC (Firm/Company) 1601 Commerce Cane Subject of City/State and Zip Code) For further information concerning this matter, please call:

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

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ARTICLE I - Name: The name of the Limited Liability Company is:	
Diane Remeta Ri	LEY LLC
ARTICLE II - Address: The mailing address and street address of the principal address and street address of the principal address.	ipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1601 COMMERCE LANE, #102	1601 Commerce LANE#100
Jupiter, Plorida 33458	JUDITER, FloRIDA 23458

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Name

| 1601 Commerce (And # 102 |
| Florida street address (P.O. Box NOT acceptable)

| Topiter | Florida | 33458 |
| 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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managir The name and address of each Manager		
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	DIANE REMETA RILEY 1601 COMMERZE LAWE, #102 JUPITER, FLORICA 33458	
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<u> </u>		
(Use attachment if necessary)		
NOTE: An additional article must be	added if an effective date is requested.	
REQUIRED SIGNATURE:	•• • • • • • • • • • • • • • • • • • •	
Signature of a member or an ar	meta alignmenter.	ų.
(In accordance with section 608. of this document constitutes an a	408(3), Florida Statutes, the execution ffirmation under the penalties of perjury	

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)

Typed or printed name of signee