10400008878

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	()
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	
		3/3/
	Office Use Only	$W_{}$



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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: We Do Re-do L.L.C. (Name of Limited Liability Company)			
(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:			
John Arthur Schueler III			
(Name of Person)			
We Do Re-do	Z.		
(Firm/Company)		OH JAN 20	
	<u> </u>	Ä	*****
1212 Tequesta St.	25.	≥	
(Address)	Si Zi	5	**************************************
	ញ់ វិហិទ្ធា	<u> </u>	'n
Ft. Lauderdale Fl. 33312	,		Sames En 6
(City/State and Zip Code)	95	<u>.</u>	أنيية
	<u> </u>	0	
For further information concerning this matter, please call:	4		
John Schueler at (954) 592-6767			
(Name of Person) (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:	04 JAN 26 SECALISAN ALLAHASSI
The name of the Limited Liability Company is:	AH MA
We Do Re-do , LLC	
ARTICLE II - Address: The mailing address and street address of the principal	5. O
Principal Office Address:	Mailing Address:
1212 Tequesta St.	1212 Tequesta St.
Ft. Lauderdale, Fl	Ft. Lauderdale, Fl
33312	33312
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registered	, ,
John Arthur Schueler III	
Name	
1212 Tequesta St	
Florida street address (P.O. Box N	OT acceptable)
Ft. Lauderdale, Fl. FI	ORIDA

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)

	ger or Managing Member is as follows:	VLL/) †10	
Title:	Name and Address:	Ĭ	JAN	7
"MGR" = Manager		S	126	CITE
"MGRM" = Managing Member		SE S		Ц
"MGRM"	John A. Schueler	th Si	*	
	1212 Tequesta St.	<u></u>	õ	
	Ft. Lauderdale, Fl. 33312	2	0	
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	N.F. September 1997			
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The state of the s				
(Use attachment if necessary)				
NOTE: An additional article must	be added if an effective date is requested.			
	The manufacture of the state of			
REQUIRED SIGNATURE:	-			
	M. an			-
Signature of a member or a	n authorized representative of a member.			
(In accordance with section	608.408(3), Florida Statutes, the execution			
of this document constitutes that the facts stated herein ar	an affirmation under the penalties of perjury			
	·			
	nur Schueler III	ı. ,		
Typed or	r 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)