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TO: Registration Section Division of Corporations SUBJECT: (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:
Michael R KORAN CONTRACTOR
80/ Beach De.
Destin I 3254 (City/State and Zip Code)
For further information conterning this matter, please call: (Name of Person) (Area Code & Daytime Telephone Number)

TRANSMITTAL LETTER

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 16, 2004

MICHAEL R KORN 801 BEACH DR DESTIN, FL 32541

SUBJECT: MICHAEL R KORAN CONTRACTOR

Ref. Number: W04000006540

We have received your document for MICHAEL R KORAN CONTRACTOR and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6917.

Letter Number: 704A00010420

Gretchen Harvey Document Specialist Supervisor

Division of Cornerations - P.O. ROY 6327 - Tallahassaa Florida 32314

ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY EVERAL **ARTICLE II- Name:** The name of the Limited Liability Company is **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent, are: Name Florida street address (P. . Box NOT acceptable) 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

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

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...

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:		
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address: Sol Beach Dr. Destin Fl. 3284	
(Use attachment if necessary)		
1		
REQUIRED SIGNATURE:	added if an effective date is requested. authorized representative of a member.	
of this document constitutes and that the facts stated herein are tr	2.408(3), Florida Statutes, the execution affirmation under the penalties of perjury rue.) The penalties of perjury rue and the penalties of perjury rue.	
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)		

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