

L04000023630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

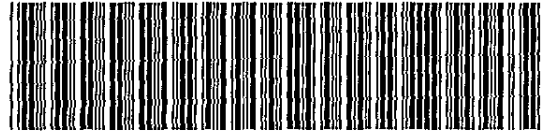
Special Instructions to Filing Officer:

1789, 676, 2848, 671

Office Use Only

W04-8113

3/29/04
MS



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03/10/04--01069--008 **25.00

02/17/04--01040--011 **100.0

FILED
04 MAR 29 PM 2:26
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Two Queens

(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:

Patricia Waller

(Name of Person)

Two Queens

(Firm/Company)

2823 Grey Oaks Blvd.

(Address)

Tarpon Springs Fl. 34688

(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia Waller

(Name of Person)

at (727)

943 5160

(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

SECRET
TALLAHASSEE, FLORIDA

04 MAR 29 PM 2:26

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 26, 2004

PATRICIA WALLER
2823 GREY OAKS BLVD
TARPON SPRINGS, FL 34688

SUBJECT: TWO QUEENS
Ref. Number: W04000008113

RECEIVED
TALLAHASSEE, FL
04 MAR 29 PM 2:26

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We have received your document for TWO QUEENS and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$25.00.

The name of a limited liability company must contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

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) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 204A00012966

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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04 MAR 29 PM 2:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Two Queens LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

2823 Grey Oaks Blvd

Tarpon Springs Fl. 34688

Mailing Address:

2823 Grey Oaks Blvd.

Tarpon Springs Fl. 34688

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Patricia Waller

Name

2823 Grey Oaks Blvd.


Florida street address (P.O. Box **NOT** acceptable)

Tarpon Springs Fl. 34688

FLORIDA

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

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:

mgr

Patricia Waller
2823 Grey Oaks Blvd.
Tarpon Springs Fl. 34688

mgr

Larry Crume
PO Box 7504
St Petesberg Fl. 33734

(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 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.)

Patricia Waller

Typed or printed name of signer

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)