

L04000042623

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN -7 AM 8:46

5p



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 9, 2004

DEBRA RAMRAS
1925 BISHOP RD
FT WALTON BEACH, FL 32547

SUBJECT: DEBRA RAMPAS LLC
Ref. Number: W04000013930

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We have received your document for DEBRA RAMPAS LLC and check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$25.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 904A00023481

TRANSMITTAL LETTER

ATX1

TO: Registration Section
Division of Corporations

SUBJECT: DEBRA RAMRAS 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:

DEBRA RAMRAS

(Name of Person)

W04-13930

DEBRA RAMRAS LLC

(Firm/Company)

1925 BISHOP RD

(Address)

FT WALTON BEACH, FL 32547

(City/State and Zip Code)

For further information concerning this matter, please call:

SHERIE FISCHER

(Name of Person)

at 850-863-3378

(Area Code & Daytime Telephone Number)

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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
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

DEBRA RAMRAS LLC**ARTICLE II - Address:**

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

Principal Office Address:DEBRA RAMRAS LLC1925 BISHOP RDFT WALTON BEACH, FL 32547**Mailing Address:**DEBRA RAMRAS LLC1925 BISHOP RDFT WALTON BEACH, FL 32547**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

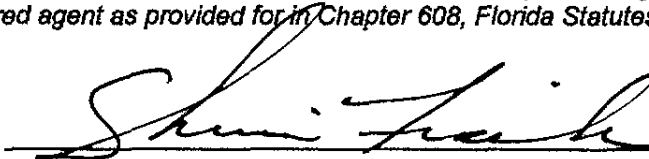
Sherie Fischer

Name

1529 W Ponderosa RdFlorida street address (P.O. Box NOT acceptable)FT Walton Beach FLORIDA 32547

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

DEBRA RAMRAS LLC

ARTICLE IV- Manager(s) or Managing Member(s):

ATX1

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

DEBRA RAMRAS

1925 BISHOP RD

FT WALTON BEACH, FL 32547

(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.)

DEBRA RAMRAS

Typed or 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)

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