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2004 JUN 14 PM 4:09  
TALLAHASSEE, FLORIDA

J. BRYAN JUN 15 2004

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:**

UZEIN "L.L.C."  
(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:

Philip Jenkinson & Velinda Ring  
(Name of Person)

Uzein  
(Firm/Company)

810 Stonybrook Circle  
(Address)

Port Orange FL 32128  
(City/State and Zip Code)

For further information concerning this matter, please call.

Philip M. Jenkinson at (386) 760-2161  
(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

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2004 JUN 14 PM 4:09  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

FILED  
2004 JUN 14 PM 4:09  
JULIUS CORPORATION'S  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Uzein L.L.C.

**ARTICLE II - Address:**

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

**Principal Office Address:**

810 Stonybrook Cir  
Port Orange, FL  
32127

**Mailing Address:**

Same

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

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

Velinda Ring  
Name  
850 Stony Point DR  
Florida street address (P.O. Box **NOT** acceptable)  
Port Orange 32128  
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.*

Velinda Ring  
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

Philip M. Jenkinson  
810 Stony Brook Cir  
Port Orange, FL 32128

MGRM

Velinda Ring  
850 Stony Point Dr  
Port Orange FL 32128

(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**

Velinda Ring  
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.)

VELINDA RING  
Typed or printed name of signee

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2004 JUN 14 PM 4:09  
JULIUS CORPORATION  
TALLAHASSEE, FLORIDA

**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)