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TRANSMITTAL LETTER

Division of Corporations		
SUBJECT: Torres Properties, LLC		41. 30g X
(Nan	ne of Limited Liability Company)	700 4 C
		THE STATE OF
The enclosed Articles of Organization and	fee(s) are submitted for filing.	
Piease return ali o	correspondence concerning this matter to the following:	THE SECTIONS
Christine Torres		TO AS
**************************************	(Name of Person)	
****		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(Firm/Company)	
4814 Longwater Way		
	(Address)	
Tampa, Florida 3361	5	
 	(City/State and Zip Code)	_
For further information concerning this m	natter, please call:	
Christine Torres	at (813) 818-9813	
(Name of Person)	(Area Code & Daytime Telephone Number)	

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

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Registration Section

TO:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OF ALAMSSK	\$1. 1. P. 1. 50
bility Compa	ny is:

ARTICLE I - N	ame:
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The name of the Limited Liability Company is:

Torres Properties, LLC

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
4814 Longwater Way	4814 Longwater Way
Tampa, Florida 33615	Tampa, Florida 33615

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Christine Torres	
Na	ame
4814 Longwater Way	
Florida street address	(P.O. Box NOT acceptable)
Tampa, FI 33615	FLORIDA
City, Sta	ate, 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

Page 1 of 2 (CONTINUED)

Title:	Name and Address:	THE WINTER
"MGR" = Manager "MGRM" = Managing Member		TOWN THE SECTION OF T
MGR	Christine Torres	
	4814 Longwater Way	00/2
	Tampa, Florida 33615	
MGRM	Pedro Torres	
	4814 Longwater Way	
	Tampa, Florida 33615	
MGRM	Alisa Torres	
	4814 Longwater Way	· · · · · · · · · · · · · · · · · · ·
	Tampa, Florida 33615	······································
(Use attachment if necessary)		
NOTE: An additional article mus	t be added if an effective date is request	ed.
REQUIRED SIGNATURE:		
<u> </u>		
Signature of a member or	an authorized representative of a member.	
(In accordance with section of this document constitutes that the facts stated herein a	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury re true.)	
Christine Torres		
	or printed name of signee	

<u>Filing Fees;</u> \$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)