## L04000054802

(Requestor's Name)
(Address)
(Address)
( dailes)
(O) (O) (O) (O) (O)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
/
(Business Entity Name)
(Document Number)
,
Contification of Clatics
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600039333676

J7/23/04--01058--016 \*\*125.00

SECRETARY OF STATE TALLAH'SSET FLORIDA



## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		*: -
SUBJECT: Deens Tainling LLC (Name of Limited Liability Company)		i.f
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
+Akhrid-Deeu Hamid (Name of Person)		. – •
Leens ainling (Firm/Company)	•	
1608 Silver Saddle DR	:	· · · · · · · · · · · · · · · · · · ·
Tallahassee, Fl. 32304 (City/State and Zip Code)	04 JUL 23	SECRETA TALLAH
For further information concerning this matter, please call:	23 PH	RY GF S
Deen at (850) 879-8957  (Name of Person) (Area Code & Daytime Telephone Number)	PH 3: 00	ONE
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	••	
STREET ADDRESS: Registration Section Registration Section		
Division of Corporations Division of Corporations		
409 E. Gaines Street P.O. Box 6327 Tallahassee, Florida 32399 Tallahassee, Florida 32314	-	•

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Deens vainting 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:  LOOD Silver Sacdle D2 - SAME  Tallahussee, FL 32304
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:    Chrick-Deal Hamick   Name   Saddle Dill
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, F.S

(CONTINUED)

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

The name and address of each Manage	of Managing Member is as follows.
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
msem	FARMIN-DEEN Hamil-OWNER. 1608, Silver Sadde DR Tallahassee, FL, 32304
(Use attachment if necessary)	
NOTE: An additional article must be required SIGNATURE:	e added if an effective date is requested.

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.)

> 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)