L04000056885

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





000039622220

07/29/04--01043--020 **130.00



J. BRIAN AUG - 2 2004

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: BREWSIER'S BEST 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:
NAN BLEWSIER (Name of Person)
(Name of Person)
Brewster's Best
(Firm/Company)
10704 PRESERVE LAKE PR # 108 FEMORY FOR 335740
(Address)
TAMEN, FL 33626
(City/State and Zip Code)
For further information concerning this matter, please call:

RYAN at (813) 393 · 9206 (Area Code & Daytime Telephone Number) (Name of Person)

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 FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORG FOR	2
FLORIDA LIMITED LIAB	BILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is: BILWISER'S BEST LLC	BILITY COMPANY ALLOWS COMPANY
ARTICLE II - Address: The mailing address and street address of the princip	pal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10704 PRESERVE LAKE DR #108	SAME
TAMPA, FL 33626	
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register Registered Agent, Registered Office The name and the Florida street address of the registered Agent, Registered Office The name and the Florida street address of the registered Agent, Registered Office The name and the Florida street address of the registered Agent, Registered Office The name and the Florida street address of the registered Agent, Registered Office The name and the Florida street address of the registered Agent, Registered Office The name and the Florida street address of the registered Agent, Registered Office The name and the Florida street address of the registered Agent, Registered Office The name and the Florida street address of the registered Agent, Registered Office The name and the Florida street address of the registered Agent (Florida Street Agent).	ered agent are:
<u>NYAN DREWS1ER</u> Name	<u>Z</u>
10704 PRESERVE LAKE Florida street address (P.O. Box	NOT acceptable)
TameA City, State, and Zi	FLORIDA 33626
	of process for the above stated limited liability

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

<u>Fitle:</u> MGR" = Manager MGRM" = Managing Member	Name and Address:
MGR	RYAN BREWKIFR 10704 PRESERVE LAKE DR * 108 TAMPR FL 33626
· · · · · · · · · · · · · · · · · · ·	
Use attachment if necessary)	
NOTE: An additional article m	ust be added if an effective date is requested.
	ust be added if an effective date is requested.
REQUIRED SIGNATURE:	ust be added if an effective date is requested. Or an authorized representative of a member.
Signature of a member	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury

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)