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(₹€	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bt	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
7/29	FLC	
<u> </u>	Office Use Only	



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## TRANSMITTAL LETTER

Division of Corporations	800	3/12460
SUBJECT: BUTLER'S T	NVESTMENTS imited Liability Company)	SLLC
The enclosed Articles of Organization and fee(s) ar	e submitted for filing. 1/25	CK # 1315 del
Please return all correspondence concerning this ma		,,,,,
Thomas H. BUTL	ER JR.	<u>.</u>
BYTLER'S INVES	TMENTS, LLC	도) 1985년 - 1985년
521 DEW Drap	COVE	. <del>-</del> •
Casselberry FL (City/State and Zip Code)	32707	≑ .
For further information concerning this matter, plea		
Thomas Butter (Name of Person)	at ( <u>407</u> <u>36</u> (Area Code & Daytime Teleph (407) 696-540	7-9/37 none Number)
STREET ADDRESS:	MAILING ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

Registration Section
Division of Corporations
409 E. Gaines Street

Tallahassee, Florida 32399

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMÍTED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

# BUTLER'S INVESTMENTS 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:
521 Dew Drop Cove Casselberry, FL 32707	521 DEW Drap COVE COSSELBERRY FI 32707

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

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

Thomas H. BUTLER JR.	12 S
Name	
521 DEW Drop COVE	
Florida street address (P.O. Box NOT acceptable)	
Casselberry FL 32707	
City, Staty, and Zip	<u> </u>

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..

Registered Agent's Signature

(CONTINUED)

#### 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:
MGRM	Thomas H. BUTLER JR. 521 DEW Drop CONF CASSELBERRY FL 32707
MGRM	Virginia A. BUTLER 531 Dew Drop Cave Casselberry, FL 32707
3 · , Sing · ,	
<del></del>	

(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.)

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)