## 640000070787

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





900041347729

19/27/04--01015--018 \*\*125.00

MJH :

ALCARA ALCARA

TILTU 4 SEP 27 AM 8: 3

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - The mailing add	Address: ress and street address of the pri	ncinal office of the Limited Lial	hility Company is:
Principal Office	-	Mailing Address:	onity Company is.
2121 Ha	wthorne Trail		UZI Hewthorne
Lakela	wthorne Trail  J.FL 33803	Lakeland Fl	_ 33803
•	-		
ARTICLE III -	Registered Agent, Registered	Office, & Registered Agent's S	Signature:
	Registered Agent, Registered e Florida street address of the re		
	e Florida street address of the re	gistered agent are:	04 TALI
	e Florida street address of the re	gistered agent are:	04 TALI
	e Florida street address of the re	gistered agent are:	04 TALI
	e Florida street address of the re	gistered agent are:	04 TALL
	Plorida street address of the respective to the	gistered agent are:	FIL 04 SEP 27 SLEWASS TALLAHASS
The name and the	Plorida street address of the respective to the	gistered agent are:  Ook  Ook  Ook  Ook  Ook  Ook  Ook  Oo	O4 SEP 27 AM 8: 36 SLL AN ASSLE FLORIDA
The name and the ing been named as repany at the place des	Plorida street address of the re  Name  Name  ZIZI Hawk  Florida street address (P.O.  Lakelaw  City, State, and gistered agent and to accept serve ignated in this certificate, I hereb	gistered agent are:  OON  Box NOT acceptable)  FLORIDA 33803 d Zip ice of process for the above stated y accept the appointment as region.	O4 SEP 27 AM 8: 36  SLANG STATE FLORIBA  d limited liability stered agent and
The name and the second second as repart at the place desired to act in this capaci	Plorida street address of the re  Name  Name  Club Handle  Florida street address (P.O.  Lakeland  City, State, and to accept serve	gistered agent are:  DON  Box NOT acceptable)  FLORIDA 33803  d Zip  ice of process for the above stated y accept the appointment as registhe provisions of all statutes relatives.	TALLAHASSIE FLORIBA  d limited liability stered agent and sting to the proper

Page 1 of 2 (CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Dale Gordon
	2121 Howshorne Trail
	Lakeland, FC 35803
MGR	Marshe Gordon
	2121 Hawthorne Trail
	Latreland, FC 33805
<del></del>	
(Use attachment if necessary)	
NOTE: An additional article must b	e added if an effective date is requested.
REQUIRED SIGNATURE	_
//de An	
Signature of a member or an	authorized representative of a member.
	8.408(3), Florida Statutes, the execution affirmation under the penalties of perjury true.)
Dale 6	~0670
Typed or p	rinted 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)