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ICT -7 PH 12:

Albert Leonard, Esq 848 Brickell Avenue, Ste. 620 Miami, Fl 33133

October 3, 2004

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fla.

Subject: Law Offices of Albert Leonard, L.L.C.

The enclosed Articles of Organization and fees are submitted for filing. Attached you will find a check in the amount of \$130.00 for filing fees, designation of a Registered Agent and Certification of Status.

Please return all correspondence concerning this matter to

Albert Leonard, Esq. Law Offices of Albert Leonard, L.L.C. 848 Brickell Avenue, Ste. 620 Miami, Florida 33133

For further information please contact me at (305) 243 4663.

Sincerely,

Albert Leonard

Cc: file

TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations

SUBJECT: LAW OFFICES OF ALBERT (EONARD, LLC.
(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:

Albert Leonard, Esq

1AW OFFICES OF Albert Leonard L.L.C.
(Firm/Company)

848 Brickell ALE Suite (20)
(Address)

For further information concerning this matter, please call:

Albert Leonard at (305) 283 - 466 3 (Area Code & Daytime Telephone Number)

(Name of Person) (Area Code & Daytime Telephone Number) Miami Fl 33/33
(City/State and Zip Code)

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

ARTICLE I - Name: The name of the Limited Liability Company is:	
LAW offices of Albert Leonard, Like.	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
848 Brickell ALT, STE 620 848 Brickell AVE, STE 6	7
Miami Fl 33131 Miami, FL 33131	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:	
Albert Leonann, Esq. Name SYS Brickell Ave, ST 620 Florida street address (P.O. Box NOT acceptable) Possible 20 Florida Street Address (P.O. Box NOT acceptable) Possible 20 Florida Street Address (P.O. Box NOT acceptable) Possible 20 Florida Street Address (P.O. Box NOT acceptable)	
848 BANCKELL AVE, ST 620 PE - P	
Florida street address (P.O. Box NOT acceptable)	
Mici.ní FLORIDA 33133 Pri 20	
been named as registered agent and to accept service of process for the above stated limited liability	

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)

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

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

Title: "MGR" = Manager	Name and Address:			
"MGRM" = Managing Member 1114 R m	Albert Leonard, E 848 Brickell Ave, 5 Miami, Fl 33137	370	(20 ()	:
				,
(Use attachment if necessary) NOTE: An additional article must be	added if an effective date is requested.	SECHE WARY OF	04 0CT -7 PM	FILED
-	athorized representative of a member. 408(3), Florida Statutes, the execution	STATE	PM 12: 21	
of this document constitutes an a	ffirmation under the penalties of perjury			

Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)