L040000 73531

2		
(Re	equestor's Name)	***
(Ac	dress)	
(Ac	idress)	****
(Ci	ty/State/Zip/Phone	e #)
PICK-UP		MAIL.
	_	_
(Bu	ı siness Entity N ar	ne)
(Do	ocument Number)	
Pertified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		1
		1011
	Office Use On	ly CILIST



700041565957

10/08/04--01026--001 **160.00

04 OCT -8 PM 12: 28

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: vanDesign Group 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 followi	ng:
Thomas Smith Jr	
(Name of Person)	
Thomas Smith Jr., Enrolled Agent	
(Firm/Company)	
1554 Boren Drive, Suite 200	
(Address)	
Ocoee, FL 34761	
(City/State and Zip Code)	
For further information concerning this matter, please call:	1717.1 170
Thomas Smith Jr at (407) 654-2777	
(Name of Person) (Area Code & Daytime Telephone N	OH OCT -8 PH

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 - N The name of the		y Company is:			
vanDESIGN	GROUP LLC	·····			
ARTICLE II - A The mailing add		ldress of the princ	cipal office of the Lim	nited Liability Co	ompany is:
Principal Office	Address:		Mailing Addr	ess:	
1888 Vista Royale	Blvd				
Orlando, FL 3283	5				
		address of the reg	office, & Registered A istered agent are:	Agent's Signatu	re:
	TOTOGOT WILL VOIT	Name		-	
	1888 Vista Roy	yale Blvd		_	
	Florida s	street address (P.O. E	Box NOT acceptable)		
	Orlando,	City, State, and	FLORIDA 32835 Zip	720	
Having been named as re company at the place des agree to act in this capacit and complete performand regiz	rignated in this celly. I further agree ce of my duties, ar	ertificate, I hereby e to comply with t nd I am familiar v	accept the appointmer he provisions of all sta	nt as registered a tutes relatifig to igations of the po	geni and I the proper

Page 1 of 2 (CONTINUED)

04 0CT -8 PM 12:

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:			
MGRM	Kristen M. VanPamelen 1888 Vista Royale Blvd			
	Orlando, FL 32835			
				
		-		
(Use attachment if nanassem)				
(Use attachment if necessary)				
NOTE: An additional article mus	t be added if an effective date is requested			
(In accordance with section	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury	O4 OCT -		

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

that the facts stated herein are true.)

Kristen M. VanPamelen

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee