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(Re	questor's Name)	
(Ado	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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J. BRWAN OCT 2.0 20041

9715 Savannah Estates Drive Lake Worth, FL 33467

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

October 14, 2004

Dear Madam or Sir,

We enclose herewith Transmittal Letter and Articles of Organization for Florida Limited Liability Company for registration of Carma Publishing LLC. I can be contacted at (561) 504-4745 to answer your questions. Our check (check # 332) in the amount of \$125.00 is attached.

Sincerely

Jeffrey G Hillier

TRANSMITTAL LETTER

TO: Registra	ation Section	0. Pp.
Division	n of Corporations	
SUBJECT: CA	ARMA PUBLISHING LLC	The Contract of the Contract o
	(Name of Limited Liability Company)	75.C. 3.
The enclosed Ar	rticles of Organization and fee(s) are submitted for filing.	allowing:
	Please return all correspondence concerning this matter to the fo	ollowing:
	JEFFREY G HILLIER	
	(Name of Petson)	
	(Finn/Company)	
9715 SA	AVANNAH ESTATES DRIVE	
	(Address)	
	LAKE WORTH, FL 33467	
	(City/State and Zip Code)	
For further infor	rmation concerning this matter, please call:	
JEFFREY G H	at (
	(Name of Person) (Area Code & Daytime Teleph	none Number)

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	A	R'	rī	CI	E	I	- 1	VΩ	me
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ARTICLE II - Address:	mineral office of the Limited Lightlity Company is
The maining address and street address of the	principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
9715 SAVANNAH ESTATES DRIVE	9715 SAVANNAH ESTATES DRIVE
LAKE WORTH, FL 33467	LAKE WORTH, FL 33467
	red Office, & Registered Agent's Signature:

9715 SAVANNAH ESTATES DRIVE
Florida street address (P.O. Box NOT acceptable)

33467

LAKE WORTH FLOCIty, State, and Zip

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..

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manag The name and address of		aging Member(s): per or Managing Member is as follows:	E CONTRACTOR OF THE PARTY OF TH
<u>Fitle:</u> "MGR" = Manager "MGRM" = Managing l	Member	Name and Address:	OCT 18 PM 2: 00
MGRM		B. CHRISTIAN GORDEAU	Alog o
		219 POPPYVIEW DRIVE	
••	May P. C. C. L. L. M.	SACRAMENTO, CA 95812	
MGRM		JEFFREY G HILLIER	
		9715 SAVANNAH ESTATES DRIVE	
	-	LAKE WORTH, FL 33467	
-	• •		
•			
			_
	,		
ari ATTALII ASSIIL.	·		
(Use attachment if nece	ssary)		
NOTE: An additional	article must	be added if an effective date is requested.	
REQUIRED SIGNAT	URE:		
-	20	ns	
Signature of	pember or	n authorized representative of a member.	
(In accordan	ce with section (508.408(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)

JEFFREY G HILLIER

Typed or printed name of signee