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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 18, 2004

DAVID P. SLATER DAVID P. SLATER, ESQ. 5154 WINDSOR PARKE DRIVE BOCA RATON, FL 33496

SUBJECT: HOUSESITTERS R US, LL C

Ref. Number: W04000038256

We have received your document for HOUSESITTERS R US, LL C and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

The total amount for filing an LLC is \$125. Please return this letter with a check for \$25.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 604A00059681

TRANSMITTAL LETTER

TO:		ration Section on of Corporations			
SUBJI	ECT:	HouseSitters R Us,LLC			
		(Name of Limited Liability Company)			
The en	closed Art	rticles of Organization and fee(s) are submitted for filing.			
		Please return all correspondence concerning this matter to the following:			
		David P. Slater			
	-				
		David P. Slater, Esq.	-1.		
		(Firm/Company)		\approx	
		5154 Windsor parke Drive	LAHAS LAHAS	007	
		(Address)	Fri *	27	
		Boca Raton, FL 33496		⊋	
		(City/State and Zip Code)			
For fu	ther infort	rmation concerning this matter, please call:	3-7	82	56
D	avid P.	• Slaterat (561) 998 9401			
		(Name of Person) (Area Code & Daytime Telephone 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

Hou	seSitters R US,LLC		
ARTICLE II - Addr The mailing address a	ress: and street address of the prin	cipal office of the Limit	ted Liability Company i
Principal Office Add 5154 Windsor Boca Raton,	Parke Drive	<u>Mailing Addre</u> 5154 Windso Boca Raton	r Parke Drive
	istered Agent, Registered (Office, & Registered A	I S S Signature:
The name and the Flo	orida street address of the reg		OCT 2
The name and the Fig		istered agent are:	OCT 27 PN 1:5 GTASSEE, FLORID
The name and the Fig	David P. Slater Name	ristered agent are:	CT 27 PN 1: ETANICE STA NHASSEE, FLOR
The name and the Fig	David P. Slater Name 5154 Windsor Pa	arke Drive Box NOT acceptable) 33496 FLORIDA	CT 27 PH 1: ETANG STA WHASSEE, FLOR

Page 1 of 2 (CONTINUED) EFFECTIVE DATE

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	Harriet Slater 5154 Windsor Parke Dr Boca Raton, F1 33496
MGRM	David P. Slater 5154 Windsor Parke Dr. Boca RAton, FL 33496
MGRM	Herb Brooks 5213 Via de Amalfi Boca RAton, FL 33496
	SECONDAL ALL
(Use attachment if necessary) Article V: Effective Date:	Nov. 1, 2004
NOTE: An additional article must	be added if an effective date is requested.
David P. Slate (In accordance with section 6	08.408(3), Florida Statutes, the execution naffirmation under the penalties of perjury 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)