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SECRETARY OF STATE DIVISION OF CORPORATION TALLAMASSEE, FLORIDA DEPARTMENT STATE TALLAMASSEE, FLORIDA TALLAMASSEE, FROM TALLAMASSEE, FROM

TRANSMITTAL LETTER

TO:

Registration Section

Tallahassee, Florida 32399

Division of	Corporations				
SUBJECT: D-		oLD AND f Limited Liability Co	DIAMON mpany)	Ds L	L.C.
The enclosed Article	es of Organization and fee(s)) are submitted for filin	ng.		
Please return all corr	respondence concerning this	matter to the following	ıg:		
daniel	(Name of Person)		_		OF NO.
b-4-p	(Firm/Company)	LONDS L.L.C	<u>.</u>		TARY OF STATE
P.O.b. 50	(Address)		 · ·		SATE 44
Lakeland	(City/State and Zip Cod	(50) le)			
For further informat	on concerning this matter, p	olease call:			
daniel by	tler ame of Person)	at (863 (Area Code	<u>687-4</u> & Daytime Telep		
Enclosed is a check for the	following amount:				
☐ \$125.00 Filing Fee ☐	3 \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy (additional copy is	s enclosed)	160.00 Filing Certificate of Certified Cop (additional copy	F Status & Py
STREET A Registration Division of 409 E. Gain	n Section Corporations		MAILING A Registration S Division of Co P.O. Box 632	Section orporations	

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
b-y-b GOLD AND DIAMONDS LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
FRANCISC BALLONA PRES. P.O.D. 50
501 W. LEMON ST. F1- 33802-50 LKLD F1- 33815
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Name Name Name Name Name Name
Florida street address (P.O. Box NOT acceptable)
City, 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, F.S..

Registered Agent's Signature

(CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	FRANCISCO BAHGNA P. (). h 50
• • • • • • • • • • • • • • • • • • •	LKLD. Fl- 33802-50
MGRM_	daniel bytler P.O.D. 50 UKLD FL 33802-50
····	7.0 9
(Use attachment if necessary)	ALCOHOL MANAGEMENT AND
NOTE: An additional article m	ust be added if an effective date is requested.
REQUIRED SIGNATURE:	ORDE .
Signature of a m	tember or an authorized representative of a member.
(In accordance w	ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury

Typed or printed name of signee

<u>Filing Fees:</u> S100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

that the facts stated herein are true.)