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EFFECTIVE DATE

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DOWNTOWN PMG	Jessional Management L. (Mability Company)
The enclosed Articles of Organization and fee(s) are sul	bmitted for filing.
Please return all correspondence concerning this matter	to the following:
THEODORA M. (Uniken Venema ame of Person)
Downtown Profe	SSIONAL Management LL
400 E. Glar	INL DR. Str. 1704 (Address)
ORLANDO -	FL. 32803 State and Zip Code)
For further information concerning this matter, please contents	, [*]
THEODORA Uniken Venema	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\Boxed{1} \$125.00 \text{ Filing Fee} \Boxed{1} \$130.00 \text{ Filing Fee & Certificate of Status}\$	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section	MAILING ADDRESS:
Division of Corporations	Division of Corporations
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, Florida 32314

HAFECTIVE DATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Downtown Professional Management L
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: 400 F. CoPonial DR. St. 1704 P.O. Box 530061 ORLANDO FL. 32803 Orlando Fl. 32853
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are: THEODORA Uniken Venemo Name October Calonial Daive Scute 1704 Florida street address (P.O. Box NOT acceptable) ORLANDO FL 3 2803 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, ES Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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	Name and Address:
"MGRM" = Managing Member	THEODORA Uniken Venem 400 E. Colonial DR. Ste. 17 ORLANDO FL 328037
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(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	hilon Vonoma

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Signature of a member or an authorized representative of a member.

THEODORA Unikon Venema Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

ARTICLE V – Effective Date

The effective date of Downtown Professional Management LLC will be January 1st, 2005.

Signature:

Printed name:

THEODORA Uniken Venema