

W4000085709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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NOV 18 2004
TALLAHASSEE, FLORIDA

W4-85709
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11/15/2004

We are submitting this letter as part of our package to the State of Florida's Department of State, Division of Corporations.

The members of the Limited Liability Corporation are as follows.

Rodney Demmetrius Knowles
854 NW 9th Court
Homestead, Florida 33030
Day Time Ph# 305-283-7011

Cedric A. Joseph
121 Whetherbine Way West
Tallahassee, Florida 32301
Day Time Ph# 850-212-7031

Please refer any questions or need for additional information to Mr. Knowles or Mr. Joseph.

Best regards,

R. Demmetrius Knowles
Registered Agent

FILED
NOV 19 PM 3:00
DIVISION OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: 2WIN Peaks Investments, 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 following:

Rodney Demmetrius Knowles

(Name of Person)

(Firm/Company)

854 NW 9th Court

(Address)

Homestead, Florida 33030

(City/State and Zip Code)

For further information concerning this matter, please call:

Rodney Demmetrius Knowles

(305)283-7011

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, 4

Certificate of Status

Certified Copy

Certificate of Status &

(additional copy is enclosed Certified Copy) (additional copy is enclosed)

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

RECEIVED
TALLAHASSEE, FLORIDA
JUL 17 1997

FILED
JUL 17 1997

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

2Win Peaks Investments, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

854 NW 9th Court
Homestead, Florida 33030

Mailing Address:

854 NW 9th Court
Homestead, Florida 33030

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Rodney Demmetrius Knowles

Name

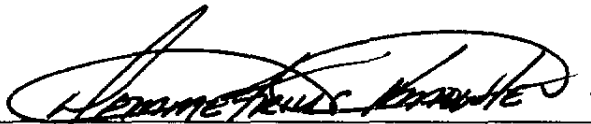
854 NW 9th Court

Florida street address (P.O. Box NOT acceptable)

Homestead, Florida 33030

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)

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03/07/18 PM 3:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: _____ **Name and Address:** _____

"MGR" = Manager

"MGRM" = Managing Member

MGR _____ Rodney Demmetrius Knowles
854 NW 9th Court
Homestead, Florida 33030

MGR _____ Cedric Joseph
121 Whetherbine Way West
Tallahassee, Florida 32301

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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

(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.)

RODNEY DEMMETRIUS KNOWLES.
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)

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

01/03/10 PM 3:00

FILED