

W04000086867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

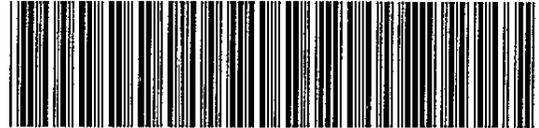
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Certificates of Status \_\_\_\_\_

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FILED  
04 NOV 23 PM 4:13  
TALLAHASSEE  
STATE OF FLORIDA

Ken J. Mazzie  
Certified Public Accountant  
PO Box 354608  
Palm Coast, FL 32135

386-586-3149

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November 20, 2004

Florida Department of State  
Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Aian P Zaleski LLC

Dear Sir/Madam:

Enclosed please find Articles of Organization for Florida Limited Liability Company along with a check for \$155. Please forward a certified copy to the LLC at their address of record.

Respectfully,



Ken Mazzie

Cc: Alan P Zaleski

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

ALAN P ZALESKI LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

54 BUTTONWORTH DRIVE  
PALM COAST, FL 32137

**Mailing Address:**

54 BUTTONWORTH DRIVE  
PALM COAST, FL 32137

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

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

ALAN P ZALESKI

Name

54 BUTTONWORTH DRIVE

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

PALM COAST, 32137

FL

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.*

x Alan P. Zaleski  
Registered Agent's Signature

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

ALAN P ZALESKI

54 BUTTONWORTH DRIVE

PALM COAST, FL 32137

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

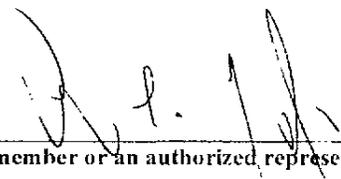
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(Use attachment if necessary)

**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.)

ALAN P ZALESKI  
\_\_\_\_\_  
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)

\$ 155