W4000088478

	(Requestor's Name)
	(Address)
	(Address)
—	(City/State/Zip/Phone #)
	PICK-UP WAIT MAIL
	(Business Entity Name)
	(Document Number)
Cer	Copies Certificates of Status
SI	al Instructions to Filing Officer:

Office Use Only



100042827691

12/01/04--01024--011 **160.00

10

04 DEC -- 1 PH 5: 15

TRANSMITTAL LETTER

d Liability Company)			
ubmitted for filing.			
er to the following:			
Name of Person)			
Firm/Company)			
(Addrose)			
(Addiess)			
State and Zip Code)	····		
call:			
at (850) 232-3466			
	elephone Number)		
			
CI \$155.00 Piling Pro- 9	2	04	
			4 A
(additional copy is enclosed)	Certified Copy (additional copy is enclosed)	<u>'</u>	in herena 3- herena 3
MAILING A	way t	PH 5	3 1
Registration Section			-946-
Division of Corporations		Ç	
	Price to the following: Name of Person) Firm/Company) (Address) (State and Zip Code) call: at (850 232-3466 Area Code & Daytime Tellowing Copy (additional copy is enclosed) MAILING Alegistration S Division of Copy. O. Box 632.	wbmitted for filing. er to the following: Name of Person) Firm/Company) (Address) /State and Zip Code) call: at (850	wbmitted for filing. er to the following: Name of Person) Firm/Company) (Address) (State and Zip Code) call: at (850

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:	
S & S GRAND PROPRETIES LLC		
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liability Com	pany is:
Principal Office Address:	Mailing Address:	
5745 ROLLING HILLS DR MILTON, FL 32570	5745 ROLLING HILLS DR MILTON, FL 32570	
ARTICLE III - Registered Agent, Reg	gistered Office, & Registered Agent's Signature: of the registered agent are:	:
RAYMOND J. SHOOP		
5745 ROLLING HILLS	Name S DR	
Florida s	street address (P.O. Box NOT acceptable)	
MILTON City	FL 32570 ty, State, and Zip	
liability company at the place designate registered agent and agree to act in this a statutes relating to the proper and compact the obligations of my position	t and to accept service of process for the above stated to this certificate, I hereby accept the appointment capacity. I further agree to comply with the provision plete performance of my duties, and I am familiar was registered agent as provided for in Chapter 608,	ent as ons of all ith and
Registered	ed Agent's Signature	04 D

(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 "MGRM" = Manag		Name and Address:			
MGR		RAYMOND J. SHOOP			
		5745 ROLLING HILLS DR			
		MILTON, FL 32570			
MGRM		IGOR A. SOUVORKINE			
	•	1134 OLD MURSERY WAY			
		PENSACOLA, FE 32514			
	1				
(Use attachment if r	necessary)				
NOTE: An additio	onal article must be a	added if an effective date is requested.			
REQUIRED SIGN	NATURE:	h			
	10/11/1				
Si	ignature 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.)					
<u>!</u>	RAYMOND J. SHOOP	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)