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SECRETARY OF STATE
ALLAHASSIE, FI OPPO-

TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: OFFERINGS 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: DANIEL W. MEYER (Name of Person)	,
DANIEL W. MEYER (Name of Person)	
(Firm/Company)	
612 WEST KING STREET (Address)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
DANIEL MEYER at (856) 933-7667 (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, Certificate of Status Certified Copy (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 Pivision of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

ARTICLES OF ORGANIZATION FOR FLORI	DA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	THE CONTRACTOR OF THE PARTY OF
OFFERINGS LLC.	
ARTICLE II - Address: The mailing address and street address of the principal	10g
Principal Office Address:	Mailing Address:
QUINCY FL 32351	SAME
ARTICLE III - Registered Agent, Registered Office	, & Registered Agent's Signature:
The name and the Florida street address of the registere	d agent are:
DANIEL MEYER Name	
GIZ WEST KING STRE Florida street address (P.O. Box No.	
QUINCY FL City, State, and Zip	32351

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 Signatur

(CONTINUED)

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	÷
MGRM	DANIEL MEYER
	QUINCY FL 32351
(Use attachment if necessary)	
NOTE: An additional article mu	st 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.)

DANIEL W. MEYER
Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)