105000025738

(Requestor's Name) (Address) 900046854439 (Address) (City/State/Zip/Phone #) 02/24/05--01028--022 **160.00 PICK-UP WAIT MAIL (Business Entity Name) Mun (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: Office Use Only Explession,

TRANSMITTAL LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Name of Limited	SKYY LLC I Liability Company)	
The enclosed Articles of	Organization and fee(s) are su	ibmitted for filing.	
Please return all correspo	ondence concerning this matte	r to the following:	
	Vasye B	iletskyy Name of Person)	
	(I	Firm/Company)	
2174	Brubeck ro	及、(Address)	
		(Addicas)	
No	rtu Port	FL 34287 State and Zip Code)	
_ _	(City/	State and Zip Code)	
For further information	concerning this matter, please	call:	
Vasyl		at (941) 456-	- 4836 or 445-2003 elephone Number)
(Name	of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check fo	r the following amount:		
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:		MAILING A	DDRESS:

Registration Section
Division of Corporations
409 E. Gaimes Street
Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

February 28, 2005

VASYL BILETSKYY 2174 BRUBECK RD. NORTH PORT, FL 34287

SUBJECT: VASYL BILETSKYY LLC

Ref. Number: W05000010123

We have received your document for VASYL BILETSKYY LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please complete and sign the 2nd page of the Articles.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 305A00013743

Michelle Hodges Document Specialist

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
VASYL Biletskyy	LLC			
ARTICLE II - Address: The mailing address and street address of the principle.	cipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
NORTH PORT FL, 34287				
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:				
The name and the Florida street address of the registered agent are: Vasyl Biletskyy Name Name				
City, Suite, and	·			

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)

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" = Managìng Member	Name and Address:
MGR	Ivan Pushkash
	North Port FL 3478
(Use attachment if necessary)	
• •	e added if an effective date is requested.
REQUIRED SIGNATURE:	
	r an authorized representative of a member.
of this document constituent that the facts stated here	
<u> </u>	U Pushkash d or printed name of signee
Filing Fees:	or printed hadre of signed

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)