BLUMBERGEXCELSIOR

Fax:888-692-9256

Mar 21 2005 16:29

P. 01

Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : BLUMBERG/EXCELSIOR CORFORATE SERVICES, INC.

Account Number : 075350000353 Phone : (212)431-5000 Fax Number : (212)431-1441

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IVISION OF CORPORATIO

## LIMITED LIABILITY COMPANY

## SANDUBOM, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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Corporate Filing

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Co	npany is:
SANDUBOM, LLC	
ARTICLE II - Address: The mailing address and street addres	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
31105 WHITLOCK DRIVE WESLEY CHAPEL, FL 33543	SAME PRINCIPAL ADDRESS
ARTICLE III - Registered Agent, F	egistered Office, & Registered Agent's Signature:
ANDREW J. PALIU	
	Name
31105 WHITLOCK	
Flori	la street address (P.O. Box <u>NOT</u> acceptable)
WESLEY CHAPEL	FL 33543
•	City, State, and Zip
liability company at the place designed registered agent and agree to act in the statutes relating to the proper and co	nt and to accept service of process for the above stated limited mated in this certificate. I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all implete performance of my duties, and I am familiar with and on as registered agent as provided for in Chapter-608, F.S.

(CONTINUED)

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BLUMBERGEXCELLIOR
62 WHITE ST
NY NY 10013

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BLUMBERGEXCELSIOR

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:	
MEMBER	WHITLOCK INVESTMENTS FAMILY LIMITED	PARTNERSHIP
(VI L.   VI M. Cal. )	31105 WHITLOCK DRIVE	=
	WESLEY CHAPEL, FL 33543	<del>-</del>
	TILOLE, OTHER CELL GOOS	-
<del></del>		-
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	15	-
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		_
		-
(Use attachment if necessary)  NOTE: An additional article must be	added if an effective date is requested.	
REQUIRED SIGNATURE:		`
an	dur Flenice	
Signature of a member or	an authorized representative of a member.	
(In accordance with section of this document constitute that the facts stated herei	6 608.408(3), Florida Statutes, the execution s an affirmation under the penaltics of perjury n are true.)	051117.2
WHITLOCK INVESTME	NTS FAMILY LIMITED PARTNERSHIP	
	or printed name of signee	155
ANDREW	J. PALIUCA	
Filing Fees:		<u></u>
\$125,00 Filing Fee for Articles of Organiza	etion and Designation (**	
of Registered Agent		<i>i</i>
\$ 30.00 Certified Copy (Optional)	Fig.	1 number
\$ 5.00 Certificate of Status (Optional)	Ä	ം വ

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