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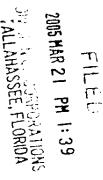
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Certified Copies	Certificate	s of Status
Special Instructions to Filin	ng Officer:	

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J. BRWAN MAR 2 3 2005

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: BE	11RicH, L ed Liability Company)	LC MANASEE PA
(Name of Emut	ed Liability Company)	
The enclosed Articles of Organization and fee(s) are	submitted for filing.	FS CO.
Please return all correspondence concerning this matt	ter to the following:	
·	h MYER (Name of Person)	Only
	(Name of Person)	
BE1/RI	CH, LI	<u> </u>
	(Firm/Company)	
16423 5	(Address)	V-e
	(7300000)	
MI Am (City	/State and Zip Code)	
For further information concerning this matter, please	call:	
Jeremiah MYER (Name of Person)	at ( 305 ) 25 (Area Code & Daytime T	4 5520 elephone Number)
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \$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)
	45, 45 V	nance.
STREET ADDRESS: Registration Section	MAILING A Registration S	Section
District of Community	Distriction of C	a-ta-atiana

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY **ARTICLE I - Name:** The name of the Limited Liability Company is: **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Premiah MYER Name 6423 S.W. III Ave Florida street address (P.O. Box NOT acceptable) MIAH FL 33157 City, State, and Zip Having been named as registered agent and to accept service of process for the above stated limited

(CONTINUED)

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..

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	Jeremiah MYER SOO
MGR	16423 S.W.IIIAVR 75
	- DIHMI F133157 8
MEG	7
MIGR	MIHA F133157
	CRISTINA MYER
•	
(Use attachment if necessary)	
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NOTE: An additional article must	t be added if an effective date is requested.
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REQUIRED SIGNATURE:  Signature of a member (In accordance with se	er or an authorized representative of a member.
REQUIRED SIGNATURE:  Signature of a member (In accordance with se	er or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of periury

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)