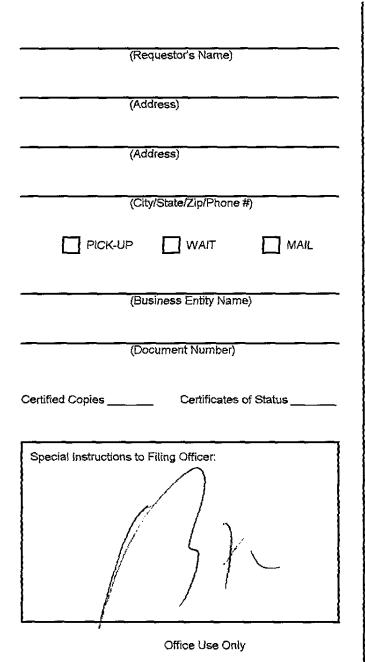
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OFFICE USE ONLY(DOCUMENT#) ASTANAS AND SALES LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Decument #) (Document #) (Document #) Walk in Pick up time Certified Copy. Mail out Will wait Photocopy Certificate of Status AMENDMENTS NEW FILINGS Profit Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Merger Other OTHER FILNGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name

Other Examiner's Initials CR2E031(9/92)

Limited Partnership

Reinstatement

Trademark

Name Reservation

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lin LLTIM	ability Company is: IN THULE LLC RESERVED TO THE STATE OF THE STATE
ARTICLE II - Address:	
The state of the s	eet address of the principal office of the Limited Liability Company is
	1 S.W. 114 STREET
minn	i, FL 33196
ARTICLE III - Registered	Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida st	reet address of the registered agent are:
: · · ·	GUOMUNDUR PALMASON
•	15474 S.W. 114 ST REST
	Florida street address (P.O. Box NOT acceptable) Wifmi' FL 33/96
-	City, State, and Zip
liability company at the place agent and agree to act in this relating to the proper and co	tered agent and to accept service of process for the above stated limited to designated in this certificate, I hereby accept the appointment as registered is capacity. I further agree to comply with the provisions of all statutes complete performance of my duties, and I am familiar with and accept the is registered agent as provided for in Chapter 608, F.S
	Registered Agent's Signature
Article IV - Management (Check box if applicable.)	
The Limited Liability Company is to be managed by one manager or more managers and is,	
therefore, a manager - man	
	NOUR PALMASON, MANAGER
15474	SN. 114 STREET
	FL 33/96
(An addit	ional article must be added if an effective date is requested)
~~~	

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.)

PALMASON GUDMUNDUR

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)