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Certified Copies	Certificates o	of Status
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T. Brumbley APR 4 2005

## TRANSMITTAL LETTER

	istration Section ision of Corporations	n = 1
SUBJECT:	BELMOR, LLC (Name of Limited Liability (	Company)
The enclosed	Articles of Organization and fee(s) are submitted fo	r filing.
Please return	all correspondence concerning this matter to the foll	owing:
	John J. Poloski, III, Esq.	
	(Name of Pers	ion)
	Lisa & Sousa, Ltd.	
	(Firm/Compa	ny)
_	5 Benefit Street	1 ALL
	(Address)	
	Providence, RI 02904	05 APR -1 M11: 43
	(City/State and Zi	p Code)
For further in	formation concerning this matter, please call:	10A
John	J. Poloski, III, Esq. at (40) (Name of Person) (Arc	274.0600 ca Code & Daytime Telephone Number)
Enclosed is	a check for the following amount:	
Ĵ \$125.00 F	Certificate of Status Certified	1.00 Filing Fee & 1.00 Tiling Fee, Certificate of Status & 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 P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and st	reet address of t	he principal	office of the L	imited Liab	ility Comp	oany is:	
Principal Office Address	<u>.</u>	Maili	ng Address:	in.			
4844 Inverness Cour	t, #105	Same			<del></del>		
Palm Harbor, FL 34	685	Sylvania arte	<u> </u>	<del></del>	<u></u>	en e	المينيات سيمباد ه
		_					
ARTICLE III - Registere	d Agent, Regist	tered Office.	& Registere	d Agent's S	ionature:	A 참	
ARTICLE III - Registere The name and the Florida	street address of	the registere		d Agent's S			 
The name and the Florida	street address of	the registere		d Agent's S			
The name and the Florida	street address of	the registere an	d agent are:	d Agent's S		FILED	#
The name and the Florida	street address of ra M. Sahagi N Inverness C	the registere an Name ourt, #105	d agent are:				が。 (で) (で) (で)
The name and the Florida:  Sand	street address of ra M. Sahagi N Inverness C	the registere an Name ourt, #105	d agent are:				#

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..

(CONTINUED)

Title:	Name and Address:		
"MGR" = Manager	•		
"MGRM" = Managing Member	<u>.</u>	. · · · · · -	
MGR, MGRM	Sandra M. Sahagian		
<del></del>	4844 Inverness Court, #105		
	Palm Harbor, FL 34685	/	
MGRM	John E. Sahagian, Jr.		
	4844 Inverness Court, #105		
	Palm Harbor, FL 34685		
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(Use attachment if necessary)	٠.,	o 50	
NOTE: An additional article mus	st be added if an effective date is requested.	05	
	To add to an extensive date is requested.	75 m	
REQUIRED SIGNATURE:			
		3 D	
Sandia	Cahanian		
	per or an authorized representative of a member.		

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)

Sandra M. Sahagian
Typed or printed name of signee