## L05 000032580

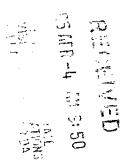
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1 H





100049453651

04/04/05--01027--009 \*\*155.00





**Charter Number Only** 

4/1/05 The

ALIDATION

S. R.R. PHE 20

## CORPORATION(S) NAME

City

	hill	Designs, LL	C
		<del>,</del>	
<u> </u>	····		
) Profit			
) NonProfit	(	) Amendment	( ) Merger
	<u></u>		
) Foreign	(	) Dissolution	( ) Mark
A I leater of Bandon archite	,	) Annual Banari	Other UC
) Limited Partnership ) Reinstatement	(	) Annual Report ) Reservation	( ) Change of Registered Agent
) venstatement		) neservation	( ) Grange of Registered Agent
Certified Copy	(	) Photo Copies	( ) Certificate Under Seal
		) Call If Problem	( ) After 4:30
Call When Ready	1		

( X ) · · · · · · · · · · · · · · · · · ·		
Neme		
Availability		
Document		
Examiner	<u> </u>	
Updater		
Verifier		<u></u>
Acknowledgment	,	<u></u>
W.P. Varifier		

Tell Impire Toll Free: 1-800-432-3028

- -

## **ARTICLES OF ORGANIZATION FOR** FLORIDA LIMITED LIABILITY COMPANY

	DEFINITION FOR DELIABILITY COMPANY
* ARTICLE I - Name: The name of the Limited Liability Company is	
CHILL DESIGNS	5 LLC
Article II - Address: The mailing address and street address of the	ne principle office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

LEO J. WILLIAMS

7320 SW 61 ST. Florida street address (P.O. Box NOT acceptable)

MIAMI FL 33143
City, State, and Zip

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

` <u>Title:</u>	Name and Address:		
MCPR	LEO J. WILLIAMS 7320 SW 61 ST.		
MGRM	MIANI, FL 33143 HUMBERTO CHILL		
	7320 SW 61 ST. MIAMI, FL 33143		
(Use attachment if necessary)			
NOTE: An additional article must be	a 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.)			

ARTICLE IV - Management / Member(s):
The name(s) and address(es) of each Manager or Managing Member is as follows"

-EO J. WILLIAMS
Typed or printed name of signee