L05 000035547

(Req	uestor's Name)	
(Addı	ress)	
		_
(Addı	ress)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Дось	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		





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04/07/05--01049--012 **52.80

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TRANSMITTAL LETTER

TO: Registration S Division of C				
SUBJECT: LLD IN	/ESTMENT GROUP, LLC	ed Liability Company)		
	(Name of Emile	d Liaomiy Company)		
The enclosed Articles	of Organization and fee(s) are s	submitted for filing.		
Please return all corres	pondence concerning this matte	er to the following:		
ANTHO	NY LAU NGUYEN			
	(Name of Person)		
C/O AIRFLOW CO	MPUTER, INC.			
	((Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
7.0.110				
742 NORT	H MILLS AVENUE	(Address)		
		(Addiess)		
ORL	ANDO, FL 32803-4039	-	-	
	(City	/State and Zip Code)		
For further information	concerning this matter, please	call:		
ANTHONY LAU NG	JYEN	at (407) 897-	5199 time Telephone Number)	
(Nam	e of Person)	(Area Code & Day	time Telephone Number)	
Enclosed is a check i	or the following amount:		OS AI	grap a
\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filing For Certified Copy (additional copy is enclosed)	Certificate of Status & 💄	
Regis Divis 409 I	EET ADDRESS: stration Section ion of Corporations E. Gaines Street hearen Florida 22200	Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations was 6327	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Com	pany is:		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:			
714 NORTH THORNTON AVENUE ORLANDO, FL 32803	SAMÉ AS PRINCIPAL		
ARTICLE III - Registered Agent, Re	gistered Office, & Registered Agent's Signature: of the registered agent are:		
ANTHONY LAU NGU	YEN		
-	Name		
742 NORTH MILLS A	VENUE		
Florida	street address (P.O. Box NOT acceptable)		
ORLANDO	FL FL TO TO THE TOTAL TO		
Cit	y, State, and Zip		
liability company at the place design registered agent and agree to act in this statutes relating to the proper and com	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all aplete performance of my duties, and I am familiar with tind as registered agent as provided for in Chapter 608, F.S.		
Anthon Registere	d'Agent's Signature		

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	ANTHONY LAU NGUYEN
	714 NORTH THORNTON AVENUEORLANDO, FL 32803
MGRM	LUONG HOANG
	714 NORTH THORNTON AVENUE ORLANDO, FL 32803
MGRM	DONG DANG
·	714 NORTH THORNTON AVENUE ORLANDO, FL 32803
	-
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	O5 APR
Anthony Signature of a member o	lan hydren
(In accordance with section	on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury
ANTHONY LAU	NGUYEN
Турес	f or printed name of signee

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)

\$160 Check