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2005 AP	R 1 P 1: 23
(Requestor's Name) SERRE	TAR / OF STATE ASSIK. FLOR
(Áddress)	800049176648
(Address)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	
(Business Entity Name)	03/31/0501031022 **130.00 -
(Document Number)	-
Certified Copies Certificates of Status	
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State FILED

MOS APR 12 P 1: 23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 1, 2005

ELAINE MOYSES 131 S. OCEAN AIRE TERR. ORMOND BEACH, FL 32176

SUBJECT: CETT, LLC Ref. Number: W05000016711

We have received your document for CETT, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 005A00022430

Agnes Lunt Document Specialist

Division of Corporations - P.O. ROY 6397, Tallahasson, Florida 39314

TRANSMITTAL LETTER

TO: Registration Section Division of Corporation	ons	-	FILE
SUBJECT: CETT, LLC			2005 APR 12 F
SUBJECT.	(Name of Limited	l Liability Company)	SECRETARY OF TALLAHASSEE, F
The enclosed Articles of Organ	nization and fee(s) are su	abmitted for filing.	
Please return all correspondence	ce concerning this matter	r to the following:	
ELIANE MOYS			
	(1)	Name of Person)	
<u></u>	(F	Firm/Company)	
131 S. OCEAN AI	RE TERR		
		(Address)	
ORMOND I	BEACH FL 32176		
	(City/	State and Zip Code)	 .
For further information concer	ning this matter, please o	call:	
ELIANE MOYSES		at (_386) 441-6995	-
(Name of Pers		(Area Code & Daytime To	lephone Number)
Enclosed is a check for the f	following amount:		
	130.00 Filing Fee & ificate 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)

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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2005 APR 12 P 1: 23

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CETT, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

131 S. OCEAN AIRE TERR
ORMOND BEACH FL 32176

131 S. OCEAN AIRE TERR

ORMOND BEACH FL 32176

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

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

ELIANE MOYSES

Name

131 S. OCEAN AIRE TERR

Florida street address (P.O. Box NOT acceptable)

ORMOND BEACH

32176

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

(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	Name and Address:	FILED
"MGRM" = Managing Member		2005 APR 12 P 1: 23
MGRM	ELIANE MOYSES 131 S. OCEAN AIRE TERR ORMOND BEACH FL 32176	SECRETARY OF STATE TALLAHASSEE, FLORIDA
MGRM	CHRISTOPHER GUERRIERO 131 S. OCEAN AIRE TERR ORMOND BEACH FL 32176	
(Use attachment if necessary) NOTE: An additional article must	t be added if an effective date is r	equested.
REQUIRED SIGNATURE:		•
Signature of a memb	er or an authorized representative of a ection 608.408(3), Florida Statutes, the extitutes an affirmation under the penalties cherein are true.)	ecution

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)

ELIANE S MOYSES
Typed or printed name of signee