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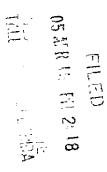
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(Requestor's Name)	
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☐ PICK-UP ☐ WAIT ☐ MAIL	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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T. Brumbley APR 1 5 2005

TRANSMITTAL LETTER

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	J. ANCAL	CHARLE FAIL CLUE I LINE	
TO: Reg	istration Section		
	sion of Corporations		
		<u></u>	•
SUBJECT:	Galilee,L	LC	
SOZUZIOZ.		of Limited Liability Company)	
The enclosed	Articles of Organization and fo	ee(s) are submitted for filing.	
	_		•
Please return	all correspondence concerning	this matter to the following:	
	The case is the fit		
	Frank H. H	<u>. (</u>	-
		(Name of Person)	•
	0.141		
	Galilee,LL	(Firm/Company)	
_	1209 Precisi	on Street	
		(Address)	
		=	<u> </u>
	Holiday, FL	34 691 - 5648 (City/State and Zip Code)	
		(City/Said and Zip Code)	
For further i	nformation concerning this mat	kr, please call:	05 APR 14 FH 2: 18
34			72
Marip	at Downey	at (813) 276-8179 (Area Code & Daytime Telephone Number)	
	(Name of Person)	(Area Code & Dayume Telephone Number)	
			
Enclosed is	a check for the following ar	nount:	
S125.00 !	Filing Fee 🌠 \$130.00 Fili	g Fee & 🗇 \$155.00 Filing Fee & 📜 \$160.00 F	iling Fee,
	Certificate of S	1	
		(additional copy is enclosed) Certified Co	
			•
	STREET ADDRESS:	MAILING ADDRESS:	
	Registration Section	Registration Section	
	- A	Division of Companying	

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam The name of the Lin		mpany is:	
Galilee,	LLC		
ARTICLE II - Add The mailing address		ss of the principal office of the Limited Liability Company	is:
Principal Office Ac	idress:	Mailing Address:	
1209 Precisio Holiday, FL		Same	
ARTICLE III - Re	gistered Agent, I	Registered Office, & Registered Agent's Signature; ess of the registered agent are: utton Name sion Street da street address (P.O. Box NOT acceptable)	
The name and the F	lorida street addre	ess of the registered agent are:	-17
	Frank H. H	utton	
•		Name	ED
	1209 Preci	sion Street	
•		da street address (P.O. Box NOT acceptable)	5
	Holiday	FI34691-5648	
•		City, State, and Zip	
	_ 1		

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)

Page 1 of 2

ARTICLE IV- Manager(s) or I The name and address of each M	Vianaging Member(s): anager or Managing Member is as follows:	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
	-	4
		-
MGR"	Frank Hutton 1209 Precision of	
, ,	Holiday FL 34691	
Werm.	Maripat Downey 404 & Louisiang Ave	
	Tompa FL 33603	
(Use attachment if necessary)		. "
NOTE: An additional article n	nust be added if an effective date is requested.	
REQUIRED SIGNATURE:		0
Firenk	All	PILE OS AFR 14
Signature of a me	ember or an authorized representative of a member.	= =
of this document of	th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.)	PILED 2: 18
Frank	Hutton Typed or printed name of signee	- 8 - 18
Filing Fees:		

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)