· LD50000039017

Stephen Bird (Réquestor's Name) (Address) OBOO Athlea Ct. (Address) DCKSONVILL, FL. 30009	700050665467		
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)			
Certified Copies Certificates of Status Special Instructions to Filing Officer:	U4/18/O50105?011 **155.00		
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T. Brumbley APR 2 1 2005

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: SAME AS PRINCIPAL SAME AS PRINCIPAL ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: STEPHEN G. BIRD Name
Z3CO ACTIEA CT SAME AS PRINCIPAC Name AS PRINCIPAC SAME AS PRINCIPAC SAME AS PRINCIPAC Name AS PRINCIPAC SAME AS PRINCIPAC SAME AS PRINCIPAC Name AS PRINCIPAC Name AS PRINCIPAC Name AS PRINCIPAC SAME AS PRINCIPAC Name AS PRINCIPAC Name AS PRINCIPAC Name AS PRINCIPAC SAME AS PRINCIPAC SAME AS PRINCIPAC Name AS PRINCIPAC Name AS PRINCIPAC SAME AS PRINCIPAC Name AS PRINCIPAC SAME AS PRINCIPAC Name AS PRINCIPAC SAME AS PRINCIPAC Name AS PRINCIPAC Name AS PRINCIPAC Name AS PRINCIPAC SAME AS PRINCIPAC Name AS PRINCIPAC
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: STEPHEN G. BIRD Name
The name and the Florida street address of the registered agent are: STEPHEN G. BIRD Name
STEPHEN G. BIRD Name
2000 NITHER OF
COUNTY CI
2300 ACTHEA CT Florida street address (P.O. Box NOT acceptable)
JACK SONVICCE, FL 32259 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)
Page 1 of 2

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

J				
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
NGR	OSCECLA EUSS 115 MENDOVER DR. JACKSONVILLE NC ZB	546		
MGE	POCKY POVEDATTI 39988 AMBERLEY CIL TENECULA, CA 98590	<u>e.</u>		
AAGRM				
				••
(Use attachment if necessary)				
NOTE: An additional article must be	added if an effective date is requeste	d.		
REQUIRED SIGNATURE: Signature of a mamber or	an authorized representative of a member.			
(In accordance with section of this document constitutes that the facts stated herein	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n are true.)			
STEPHEN Typed	G-B/PD or printed name of signee			
Filing Fees: \$125.00 Biling Fee for Articles of Organiza			05 APR	راب
of Registered Agent \$ 30.00 Certified Copy (Optional)	-		යා	
S S Of Certificate of Status (Ontional)		100		TI