L05000042287

(R	equestor's	Name)	
			
(A	ddress)		
(A	ddress)		
	itu/State/7i	p/Phone #)	
(0	ity/Otale/21	pri none n j	
PICK-UP	□ w	'AIT	MAIL
(B	usiness En	tity Name)	
(D	ocument N	umber)	
Certified Copies	_ Cer	tificates of	Status
Special Instructions to	Filina Offic		
\	J		
			Ţ
-	·		j
Mand Mar dillig			}
Distriction of the contract of			
	Poffice I	Jse Only	
	nod }		
	į		
i 🖟 👟	TOO I		
-	.04		



100050872251

04/25/05--01055--021 **160.00

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	3		
SUBJECT:	SUNLi	SHT Real ?	-y LLC
SOBOLCI.	(Name of Limited	Liability Company)	
The enclosed Articles of Organiz	ation and fee(s) are su	bmitted for filing.	
Please return all correspondence	concerning this matter	to the following:	
	Tour	noua Lee ame of Person)	
	(14	ance of remon)	
	Sunlig	ht Realty	((.e
	(F	irm/Company)	
	12915	Lake V	sta or
		(Address)	_
	Gibso	NTON, FC.	335 34
	(City/s	State and Zip Code)	
For further information concerning	ng this matter, please o	eall:	
Toumoua	Lea	. 813 . 85	1-2629
(Name of Person)	at (813) 85 f	Telephone Number)
Enclosed is a check for the fol	lowing amount:		
□ \$125.00 Filing Fee □ \$13 Certif	30.00 Filing Fee & icate 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 ADI	PRESS:	MAILING	*
Registration Se Division of Co		Registration	Section Sections
409 E. Gaines Tallahassee, Fl	Street	P.O. Box 63	or portugors.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Sunlight	Realty	LLC
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the L	imited Liability Company is:
Principal Office Address:	Mailing Address:	
12915 Lake Vista on Gibsonton, FL. 33534	12915 Gibsoni	Lake Vista Or ON, FC-33534
ARTICLE III - Registered Agent, Registered	Office, & Registere	d Agent's Signature:
The name and the Florida street address of the re	egistered agent are:	
Toumouo		
12915 La		
	ress (P.O. Box NOT acce	
Gb Sorton City, State, a	FL 335 md Zip	<u>3</u> 4
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe accept the obligations of my position as regis	his certificate, I hereby v. I further agree to co rformance of my dutie	v accept the appointment as omply with the provisions of all s, and I am familiar with and

(CONTINUED)

Registered Agent's Signature

MGR	Toumona Lee 12915 Lake Vist GIDSONTON, FL. 3
(Use attachment if necessary) NOTE: An additional article mus	t be added if an effective date is requested
REQUIRED SIGNATURE:	
	Lamesto.
Signature of a memi	per or an authorized representative of a member.
(In accordance with s of this document con that the facts stated	
	Tournoua Lee : yped or printed name of signee
•	yped of printed maine of signee
Filing Fees:	