

605000043419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

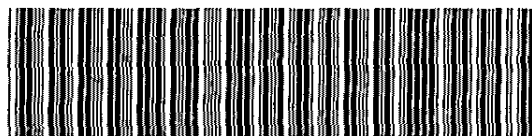
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05 MAY -3 PM 1:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

05 MAY -3 PM 1:23

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Anthony L. Cuticello  
Requester's Name  
3101 AZRA TRAIL  
Address  
Tallahassee FL 32309 850-508-5067  
City/State/Zip Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. SKYE INVESTMENTS, L.L.C.  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

**Examiner's Initials**

**SKYE INVESTMENTS, L.L.C.  
ARTICLES OF ORGANIZATION**

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**ARTICLE I - Name:**

The name of the Limited Liability Company is **SKYE INVESTMENTS, L.L.C.**

**ARTICLE II - Mailing Address:**

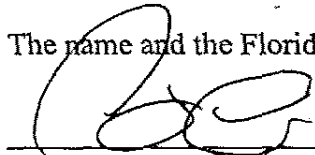
The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office and Mailing Address:**

3101 Azra Trail  
Tallahassee, FL 32309

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

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



ANTHONY L. CONTICELLO  
3101 Azra Trail  
Tallahassee, FL 32309

*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..*

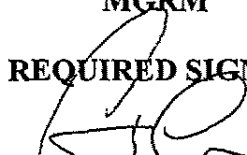
**ARTICLE IV- Manager(s) or Managing Member(s):**

This shall me a Member managed company, and the name and address of each Manager or Managing Member is as follows:

ANTHONY L. CONTICELLO  
3101 Azra Trail  
Tallahassee, FL 32309  
MGRM

STACEY M. CONTICELLO  
3101 Azra Trail  
Tallahassee, FL 32309  
MGRM

**REQUIRED SIGNATURE:**



ANTHONY L. CONTICELLO  
3101 AZRA TRAIL  
MGRM

Date: May 2, 2005

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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