## 105000049354

(Re	questor's Name)	
(Ad	dress)	
<i>(</i> , (a)	aross,	
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



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05/11/05--01051--012 \*\*125.00



105-49354

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: 5 K 140 121495 11C (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
DANIE! C BRENNAN (Name of Person)		
(Firm/Company)		
13674 RAJeigh LN (Address)		
FT MYERS FL 33919 (City/State and Zip Code)		
For further information concerning this matter, please call:		
i WHIG! BREWMAN at (238) 945 - 2500 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee Status Stat		
STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines Street  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327		

Tallahassee, Florida 32314

Tallahassee, Florida 32399

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
SK Holdings 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:	
13674 RAJeigh LN FT myers FL 33919	SAME	
ARTICLE III - Registered Agent, Registered		
The name and the Florida street address of the r		
TOAHIEL C BIZE Name	<u> </u>	
	LN, FT mY ens fl 33919 Iress (P.O. Box <u>NOT</u> acceptable)	
City, State, a	FL 339/9 and Zip	
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S	

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
mgR.	DAHIE! BREWHAN  13674 RATEIGH LM  FT MYERS FI 33919
(Use attachment if necessary)  NOTE: An additional article must b	e added if an effective date is requested.
REQUIRED SIGNATURE:	•
Signature of a member (In accordance with secti	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution
that the facts stated her	ates an affirmation under the penalties of perjury rein are true.)  SCENMAN  d or printed name of signee

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)