05000054581

(Re	equestor's Name)) }
(A<	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phon	e#)
PICK-UP		MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
	Office Use Or	



05/26/05--01029--002 **125.00



¥	TRANSMI	ITAL LETTER	
TO: Registration Division o	n Section f Corporations		
SUBJECT:	555, 1	LLC	
	(Name of Limit	ed Liability Company)	
The enclosed Artic	es of Organization and fee(s) are	submitted for filing.	
Please return all con	respondence concerning this mat	ter to the following:	
		rnesto Velasco	<u>.</u>
		(Name of Person)	
		555, LLC	
		(Firm/Company)	
	1079	NE Pinehill Terrace	AST 05
		(Address)	ALC: N
			ASSE 26
_		n Beach, FL 34957 y/State and Zip Code)	PH 2: 09
For further informa	tion concerning this matter, please	e call.	INTE ORIDI
	non concerning and matter, prod-		Þ
	on Massaglia	_ at (
·			-
Enclosed is a che	ck for the following amount:		
Ø \$125.00 Filing 1	Fee 🖸 \$130.00 Filing Fee & Certificate of Status	 Certified Copy (additional copy is enclosed) 	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	TREET ADDRESS: egistration Section	MAILING A Registration 5	
E 4	livision of Corporations 09 E. Gaines Street	Division of C P.O. Box 632	orporations 7
Ť	allahassee, Florida 32399	Tallahassee, I	Florida 32314

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

5	55, LLC	
ARTICLE II - Address: The mailing address and street addres	s of the principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:	
555, LLC	Same	
1079 NE Pinehill Terrace		
Jensen Beach, FL 34957		
ARTICLE III - Registered Agent, F		ent's Signature;
Err	esto Velasco	ASK NO
	Name	
1079 N	E Pinehill Terrace	PU N

Florida street address (P.O. Box <u>NOT</u> acceptable) Jensen Beach, Fil 34957

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..

60 %

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Ernesto Velasco
	1079 NE Pinehill Terrace
	Jensen Beach, FL 34957
•••••••_	* . <u></u>
···	
	- · <u>· · · · · · · · · · · · · · · · · ·</u>
(Use attachment if necessary)	LAHAS
NOTE: An additional article mus	t be added if an effective date is requested T
REQUIRED SIGNATURE:	FLORIE
	Allufra ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
-	er or an authorized representative of a member.
(In accordance with se of this document cons that the facts stated	ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury herein are true.)
- 	Ernesto Velasco yped or printed name of signee
	Shar or britisen mune or allies

\$ 5.00 Certificate of Status (Optional)