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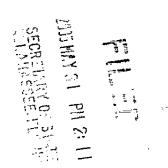
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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TRANSMITTAL LETTER

Division of Corpo	rations		
SUBJECT:	Bei Is	le Enterprises, LLC	
		d Liability Company)	
	of Organization and fee(s	,	
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		n Belisle	
	1)	Name of Person)	
	Bel Isie Er	iterprises, LLC	
		(Firm/Company)	
	4700 1 5-4	water Of the of	
·	17UU LIVIN	(Address)	<u> </u>
		, ,	
	Sarasota,	Florida 34231	
- "	(City)	/State and Zip Code)	
For further information	concerning this matter, p	lease call:	
Brian E (Name of		941-400 (Area Code & Daytime	
`	•	(Alea Code & Dayume	relepitorie (surficer)
Enclosed is a check for	or the following amount:		
X \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate 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 ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FO	OR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Compa	any is:
Bel Isle Enterprises, 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:
Bel isle Enterprises, LLC	Bel Isle Enterprises, LLC
1700 Livingstone Street	1700 Livingstone Street
Sarasota, Florida 34231	Sarasota, Fiorida 34231
ARTICLE III - Registered Agent, Registered Agent	stered Office, & Registered Agent's Signature: s of the registered agent are:
	Brian Belisle
	Name
1700	Livingstone Street
	street address (P.O. Box <u>NOT</u> acceptable)
Sarasota	FL 34231
	, State, and Zip
Having been named as registered agen	t and to accept service of process for the above stated limite

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MĢRM	Brian Belisle 1700 Livingstone Street Sarasota, Florida 34231
············	
(Lice attachment if necessary)	

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(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.)

Brian Belisle

Typed 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)