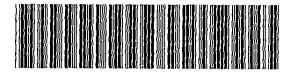
# L05000059208

(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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ALLA CASSES STORMA

W05-25703

May 5, 2005

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Subject:

Florida Limited Liability Company

Applicant:

Irais Gonzalez

Company:

Irais Gonzalez, L.L.C. 5675 Timber River Drive

Address:

Orlando, Florida 32807

Telephone:

407.384.7766 or 407.658.0630

#### Dear Sir/Madam:

I am submitting for the following documents to be processed along with a check in the amount \$160.00.

> Transmittal Letter

> Articles of Organization For Florida Limited Liability Company

Should you have any questions, please do not hesitate to contact me at 407.384.7766 or 407.658.0630. Thank you for your assistance with this request.

Sincerely,

Hais Collzaicz

**Enclosures** 

## TRANSMITTAL LETTER

TO: Registration Se Division of Co			
SUBJECT:	lrais :	Gonzalez, L.L.C.	
	(Name of Limite	d Liability Company)	
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.	50
Please réturn all corresp	ondence concerning this matte	er to the following:	SEF
		s Gonzalez	POS JUN 10 TO THE PROPERTIONS OF PLORIDA
	(t	Name of Person)	PE
		Sonzalez, L.L.C.	
	(	Firm/Company)	
	5675 <sup>-</sup>	Timber River Drive	
		(Address)	
	Orlando	o, Florida 32807	
	(City/	State and Zip Code)	
For further information	concerning this matter, please	call:	
Carmen Luciano		at ( 407) 658-0630	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for	r the following amount:		
3 \$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: Registration Section		MAILING A Registration S	

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 23, 2005

IRAIS GONZALEZ IRAIS GONZALEZ, L.L.C. 5675 TIMBER RIVER DRIVE ORLANDO, FL 32807

SUBJECT: IRAIS GONZALEZ, L.L.C.

Ref. Number: W05000025703



We have received your document for IRAIS GONZALEZ, L.L.C., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$160.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Document Specialist

Letter Number: 505A00036898

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: Irais Gonzalez, L.L.C. **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Comparison Principal Office Address: Mailing Address: 5675 Timber River Drive 5675 Timber River Drive Orlando, Florida 32807 Orlando, Florida 32807 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Irais Gonzalez Name 5675 Timber River Drive Florida street address (P.O. Box NOT acceptable) Orlando, 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

(CONTINUED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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	Name and Address:
"MGRM" = Managing Member	
MGR	Irais Gonzalez
	5675 Timber River Drive
	Orlando, FL 32807
	Irais Gonzalez  5675 Timber River Drive  Orlando, FL 32807
	75
(Use attachment if necessary)	
	11 116
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 of this document constitute	n 608.408(3), Florida Statutes, the execution as an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Irais Gonzalez Typed or printed name of signee