L05-600062438

2005 JUN 1 1 P 1:	7'
SECRETARY OF STA TALLAHASSEE, FLOR (Requestor's Name)	TE A
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TRANSMITTAL LETTER FILED Registration Section TO: Division of Corporations 2005 JUN 17 P 1:31 SECRETARY OF STATE TALLAHASSEE, FLORIDA (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: For further information concerning this matter, please call:

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status

☐ \$155.00 Filing Fee & Certified Copy

(additional copy is enclosed)

9 \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS: 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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	2005 JUN 17 P 1: 3
The name of the Limited Liability Company is:	SECRETARY OF STATE TALLAHASSEE, FLORID,
Donald Fortune, L.L.	<u> </u>
ARTICLE II - Address: The mailing address and street address of the principal office of the	e Limited Liability Company is:
Principal Office Address: Mailing Addres	<u>s:</u> ,
895 NW 3nd Street 895 N.W. LAKEBUHLER LAKEBUHLER	3 nd Street i, Florida 32054
ARTICLE III - Registered Agent, Registered Office, & Registe	ered Agent's Signature:
The name and the Florida street address of the registered agent are Donald Fortune Name	:
895 NW 3rd Street	
Florida street address (P.O. Box <u>NOT</u> a LAKUBWHEK FL 37054 City, State, and Zip	
Having been named as registered agent and to accept service of pro- liability company at the place designated in this certificate, I hen- registered agent and agree to act in this capacity. I further agree to statutes relating to the proper and complete performance of my du- accept the obligations of my position as registered agent as prov	ocess for the above stated limited eby accept the appointment as comply with the provisions of all ties, and I am familiar with and
Donald Worth	
· · · · · · · · · · · · · · · · · · ·	

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or M. The name and address of each Ma	lanaging Member(s): mager or Managing Member is as folio	ows:
<u>Title:</u>	Name and Address:	FILED
"MGR" = Manager "MGRM" = Managing Member ^ M C_R"	Donald Facture	2005 JUN 17 P 1: 31
wo	Lailibutten, Fl	SECRETARY OF STATE LIAMASSEE, FLORIDA 32054
"AYGKM"		
And the state of t		
		· · · · · · · · · · · · · · · · · · ·
Residents for the second of th		
(Use attachment if necessary)		
NOTE: An additional article m	ust be added if an effective date is re	equested.
REQUIRED SIGNATURE:		
Signature of a me	Four	Mensiber.
(In accordance with of this document of	h section 608.408(3), Florida Statutes, the exe constitutes an affirmation under the penalties of the decin are true.)	cution
\mathcal{L}	Typed or printed name of signee	
Filing Fees:	- 1 km 4- hrunga rumiya ay millinga	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)