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

Office Use Only



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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			FILED
	HOLDINGS are of Limited Liability Company	LLC 20 MLI	TO JUL 18 P 12: 34 CRETARY OF STATE LAHASSEE, FLORIDA
The enclosed Articles of Organization and	fee(s) are submitted for filing.		- Thom
Please return all correspondence concernin	g this matter to the following:		
A. Bi	ARRY STAW (Name of Person)	EY	·
	(Firm/Company)		
3429 BR	PADENHAM L (Address)	ANE	_
DAVIE,	FLORIDA (City/State and Zip Code)	33328	,
For further information concerning this ma	tter, please call:		
A. BARRY STANLEY (Name of Person)	at (954) (Area Code &	437-2416 Daytime Telephone Number	r)
Enclosed is a check for the following a	mount:		
S125.00 Filing Fee S130.00 Filing Fee Certificate of S		Certificate of	of Status & opy
STREET ADDRESS: Registration Section		AILING ADDRESS:	

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

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	CECCETABY OF S
The name of the Limited Liability Company is:	SECRETARY OF S' TALLAHASSEE, FLI

ALVA HOLDINGS LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

Principal Office Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

A. BARRY STANLEY

3429 BRADEWHAM LAWE

Florida street address (P.O. Box NOT acceptable)

DAVIE FL 33328

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..

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:

Title: "MGR" = Manager	Name and Address:	FILED
"MGRM" = Managing Member	r	2005 1111 10 -
MER	A. BARRY STANLEY	, 2005 JUL 18 P 12: 3
	3429 BRADENHAM L	-AMELUNE TARY OF STATE
M6RM	PAMELA KAY STANCE	· · · · · · · · · · · · · · · · · · ·
	3429 BRADEN HAM DAVIE, FL 3332	LANE 28
		······································
(Use attachment if necessary)		
NOTE: An additional article	must be added if an effective date is requ	uested.
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.)

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)