# L05000076578

(F	Requesto	r's Name)	
(/	\ddress)		
(/	Address)		
(0	City/State	/Zip/Phone	e #)
PICK-UP		WAIT	MAIL
(E	Business	Entity Nan	ne)
(C	Documen	t Number)	. ···
Certified Copies	<	Certificates	of Status
Special Instructions t	o Filing C	officer:	
ome allability			
ce or ant xaminer	٠	-	
(poeter	Offic	e Use Oni	у
Private Comment	'n		
grand signment	DUC		
e e estifyer	LLC		



400057779624

08/01/05--01018--027 \*\*125.00

SECUEIVANA CLEIME SECUEIVA SEC

# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: EGK LLC (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:	
CEOPGE LAMBROS (Name of Person)	
EGK LLC (Firm/Company)	_
762 SW LONG LAKE CT	
PALM CITY FL 34990 (City/State and Zip Code)  PS =	3
For further information concerning this matter, please call:	
100 L	- T
· · · · · · · · · · · · · · · · · · ·	90
S125.00 Filing Fee S130.00 Filing Fee S2 Certificate of Status Certified Copy (additional copy is enclosed)  S160.00 Filing Fee S2 Certified Copy (additional copy is enclosed)	s &

## 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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

y is:

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..

gistered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	GEORGE LAMBROS 762 3W LONG LAKECT PALM CITY FL 34990
MGEM	FATHLEEN KESLER 762 SW LONG LAKE CT PALM CITY FL 34990
MGRM	EDDIE HUGGINS 2500 SE WILLOUGHBY BLVD STUART FL 34994
(Use attachment if necessary)	
• • • • • • • • • • • • • • • • • • • •	ust be added if an effective date is requested.
REQUIRED SIGNATURE:	
	Saulus
(In accordance wit of this document c that the facts star	mber or an authorized representative of a member.  h section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury ted herein are true.)  Typed or printed name of signee
Filing Fees:	SSEE TO
\$125.00 Filing Fee for Articles of C of Registered Agent \$ 30.00 Certified Copy (Optional)	

\$ 5.00 Certificate of Status (Optional)