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(Requestor's Name)
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Budget Improvements, LLC (Name of Limited Liability		
The enclosed Articles of Organization and fee(s) are submitted	for filing.	
Please return all correspondence concerning this matter to the fo	ollowing:	
Marilyn L. Marmo (Name of Person)		
Budget Improvements, I		
(Firm/Com		
3880 East State Road 4	16	
(Address	5)	
Geneva, FL 32732	_	
(City/State and 2	Zip Code)	
For further information concerning this matter, please call:		
Marilyn L. Marmo at (4 (Name of Person) (A	07) 349-9416 Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status Certific	5.00 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

- · · · · · · · · · · · · · · · · · · ·	LLC	
ARTICLE II - Address: The mailing address and street address	ess of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
3880 East State Road 46	3880 East State Road 46	
Geneva, FL 32732	Geneva, FL 32732	
ADDICK E YYY Doctor J.A.		
The name and the Florida street add Marilyn 3880 Eas	Registered Office, & Registered Agent's Signature:	FLED

(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	
MGRM	Marilyn L. Marmo
	3880 East State Road 46 Geneva, FL 32732
MGRM	Gary A. Marmo (Sr)
	3880 East State Road 46
	Geneva, FL 32732
en e	
	Contract Con
and the second s	The state of the s
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Marifon J.M	Parso
Signature of a member of	an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated here.	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)
MARILUN A	or printed name of signee
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)