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(Requestor's Name)	
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PICK-UP WAIT	MAIL
(Business Entity Name	a)
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Certified Copies Certificates of	of Status
Special Instructions to Filing Officer:	

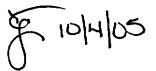
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2005 OCT -3 PH I2: 3



## **COVER LETTER**

(Name of Limited Liability Company)

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TO:

Registration Section Division of Corporations

2005 OCT -3 PM 12: 39

SUBJECT: Dollar Plus Deals, LLC

TALLAHASSEE FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hilvano Nava
(Name of Person)
Dollar Plus Deals, LLC
(Firm/Company)
1009 Lake Shore Ranch Drive
(Address)
Seffner, FL 33584
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Anderson

(Name of Person)		(Area Code & Daytime Telephone Number)	
Enclosed is a check for	or the following amount:		
▼ \$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)

at (813

**Mailing Address** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

910-0100

2661 Executive Center Circle Tallahassee, FL 32301

## LITY, COMPANY, Sole Confidence ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABII **ARTICLE I - Name:** The name of the Limited Liability Company is: Dollar Plus Deals, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: **Mailing Address:** Principal Office Address: 1009 Lake Shore Ranch Drive 1009 Lake Shore Ranch Drive Seffner, FL 33584 Seffner, FL 33584 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Hilvano Nava Name 1009 Lake Shore Ranch Drive Florida street address (P.O. Box NOT acceptable) Seffner, FL 33584 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 emplete 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..

(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  "MGRM" = Managing Member  MGRM  Hilvano Nava  1009 Lake Shore Ranch Drive  Seffner, FL 33584   (Use attachment if necessary)  ICLE V: Effective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be more than five business days prior days after the date of filing.)  REQUIRED SIGNATURE:  Signatury 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.)  Hilvano Nava  Typed or printed name of signee	The name and address of each Manager	ing Member(s):	di di diaman di
Title: "MGRM" = Manager "MGRM	. •	or Managing Member is as follows	s: 2005 OCT - 3 PH 12
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:	<u>Title:</u> "MGR" = Manager	Name and Address:	TALLAHASSEE FLO
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:	MGRM	Hilvano Nava	
(Use attachment if necessary)  CLE V: Effective date, if other than the date of filing:			-
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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.)  Hilvano Nava	effective date is listed, the date must be sp	ecific and cannot be more than fr	ve business days pric
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of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)  Hilvano Nava	REQUIRED SIGNATURE:	9/30/05	
	REQUIRED SIGNATURE:	2/30/05 an authorized representative of a men	ıber.
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	REQUIRED SIGNATURE:  Signature of a member of this document constitute that the facts stated herei	n 608.408(3), Florida Statutes, the executies an affirmation under the penalties of per	on

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