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T. Burch OCT & Mile.

# TRANSMITTAL LETTER

,	TO: Registration Section Division of Corporations		
	SUBJECT: COWBOY WAY ENTERPRISES 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:		
	STEVEN J. LUPO SR.		
	(Name of Person)		
	COWBOY WAY ENTERPRISES LLC		
	(Firm/Company)		
	807 SAN REMO COURT		
	(Address)		
KISSIMMEE, FLORIDA 34758			
	(City/State and Zip Code)		
	For further information concerning this matter, please call:		
	000 0440		
	RAE A. NABRIZNY at (407) 932-2119 (Name of Person) (Area Code & Daytime Telephone Number)		
	(,,,,		
	Enclosed is a check for the following amount:		
í	3 \$125.00 Filing Fee		

STREET ADDRESS:

...

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 4, 2005

STEVEN J LUPO SR 807 SAN REMO COURT KISSIMMEE, FL 34758

SUBJECT: COWBOY WAY ENTERPRISES LLC

Ref. Number: W05000045597

We have received your document for COWBOY WAY ENTERPRISES LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Document Specialist New Filings Section

Letter Number: 405A00060171

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Com	pany is:	
COWBOY WAY ENTERPRISES LLC		
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Limited Liabi	lity Company is
Principal Office Address:	Mailing Address:	
807 SAN REMO COURT	807 SAN REMO COURT	
KISSIMMEE, FLORIDA 34758	KISSIMMEE, FLORIDA 34758	
ARTICLE III - Registered Agent, Reg	gistered Office, & Registered Agent's Sign of the registered agent are:	7A
1	RAE A. NABRIZNY	OCT PARE
	Name	-6 -6
807 SAN	REMO COURT	<b>AM 10: 08</b>
Florida s	treet address (P.O. Box <u>NOT</u> acceptable)	;; <b>;</b>
KISSIMM	EE, FL 34758	<u></u> ₹7 <b>&amp;</b>
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.

(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	Name and Address:			
"MGR"	STEVEN J. LUPO SR.  807 SAN REMO COURT  KISSIMMEE, FLORIDA 34758			
(Use attachment if necessary)				
NOTE: An additional article must	be added if an effective date is requested.			
REQUIRED SIGNATURE:				
Steven	- J Lupo Sy			
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.)				
	EN J. LUPO SR.			
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)