10500098527

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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OF OCT - 6 PM 2: L2

W05-44989

COVER LETTER

TO: Registration Se Division of Co			
SUBJECT:	CASHModels.	Cam LLC 1 Liability Company)	
The enclosed Articles of	f Organization and fee(s) are su	abmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
	Jan	ves Withocki Name of Person)	
	C	Vame of Person)	
	CASHMOd	els Ivc. Firm/Company)	
	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·
	151 N.	NOBHILL Rd 2 (Address)	269
		(Address)	
	PLANTAT	10W FL 3332 (State and Zip Code)	Y .
	(City/	State and Zip Code)	
For further information	concerning this matter, please	call:	
ames!	Vitucki	at (95Y 777 (Area Code & Daytime Te	2190
(Name	of Person)	(Area Code & Daytime Te	elephone 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)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns



September 29, 2005

JAMES WITWCKI 151 N NCB HILL RD 269 PLANTATION, FL 33324

SUBJECT: CASMODELS.COM LLC

Ref. Number: W05000044989

We have received your document for CAS4MODELS.COM LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please list the only the address in article II.,

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) 245-6931.

Letter Number: 105A00059355

Becky McKnight Document Specialist New Filings Section

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

CASH models.com LLC

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Com	npany is:
	. Com LLC any, "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:
Principal Office Address:	Mailing Address:
PC - CONTROL OF THE POPULATION	151 N. NOB HILL ROLZEG PLANTATION
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address florida street address Florida for the Flori	.
liability company at the place desig registered agent and agree to act in thi statutes relating to the proper and co	nt and to accept service of process for the above stated limited mated in this certificate, I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all implete performance of my duties, and I am familiar with and on as registered agent af provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(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:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
	1
MGRM	
	151 N. WIBHILL 269
. 4	- 14-01-4110W PIZ 33309
moren	WATT Deak
	Fret Lande data El 350
4.Q	
(Use attachment if necessary)	
LEV: Effective date if other than the	e date of filing: 9-15-05 (OPTIONA
ffective date is listed, the date must l	be specific and cannot be more than five business day
days after the date of filing.)	
v ·	
• • • • • • • • • • • • • • • • • • • •	1
REQUIRED SIGNATURE:	
٥	I A
٥	
REQUIRED SIGNATURE:	per or an authorized representative of a member.
REQUIRED SIGNATURE: Signature of a memb (In accordance with se	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

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)