## LO5000100517

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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## **COVER LETTER**

TO: Registration Se Division of Co						
SUBJECT: CherD	es, LLC					
(Name of Limited Liability Company)						
The enclosed Articles o	f Organization and fee(s) are so	ubmitted for filing	<b>g</b> .			
Please return all corresp	ondence concerning this matte	r to the following	:			
Pamela L	uberta					
<del></del>	(I	Name of Person)				
CherDes,	LLC					
	(	Firm/Company)				
5121 Her	on Place					
		(Address)				
Coconut Creek, FL 33073						
(City/State and Zip Code)						
For further information	concerning this matter, please	call:				
Jennifer Milligan  at ( 228 ) 388-6596  (Name of Person) (Area Code & Daytime Telephone Number)						
(Name of Person)		(Area Cod	e & Daytime T	elephone Number)		
Enclosed is a check for	or the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Cop (additional copy	у	\$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	Registrati Division Clifton E 2661 Exe	ourier Addression Section of Corporation Building ecutive Center see, FL 32301	ns		

## ARTICLES OF ORGANIZATION FOR FLORIDA LÍMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
The name of the Dimited Date in, Company in	
CherDes, LLC	
(Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Frincipal Office Address:	Manting Address.
5121 Heron Place	5121 Heron Place
Coconut Creek, FL 33073	Coconut Creek, FL 33073
	· · · · · · · · · · · · · · · · · · ·
The name and the Florida street address of the re Pamela Luberta  Name	gistered agent are:
5121 Heron Place	
Florida street addi	ress (P.O. Box <u>NOT</u> acceptable)
Coconut Creek	FL 33073
City, State, and	ad Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S
Registered Agent's Signatu	ire (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	-
MGRM	Pamela Luberta
	5121 Heron Place
	Coconut Creek, FL 33073
	A sail -
(Use attachment if necessary)	
ARTICLE V: Effective date, if other tha	n the date of filing: October 1, 2005 . (OPTIONAL) ust be specific and cannot be more than five business days price.
REQUIRED SIGNATURE:	De Just
Signature of a m	ember or an authorized representative of a member.
of this document	ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury tated herein are true.)
	Typed 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)