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(Requestor's Name) (Address)	SECT TALLA	600062142526
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	-	1271970501U15013 ** 125 .0 0
(Document Number) Certificates of Status Special Instructions to Filing Officer:		·
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Office Use Only

FILED

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Must end with the words Limited Liability Company Limited	L.L.C. 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:		
9800 S. OLAKY, AUR ON P. 37824	9800 S. Orange Aug One Pr 32824		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Limbility 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 re-	gistered agent are:		
Onlando Ri	vera		
3583 Con	COY RD Um+ 1112 ress (P.O. Box NOT acceptable)		
City, State, at	FL 32839 ad Zip		
liability company at the place designated in the registered agent and agree to adt in this capacity statutes relating to the proper and complete per	occept service of process for the above stated limited his certificate, I hereby accept the appointment as Lighther agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent af provided for in Chapter 608, F.S		

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Manager The name and address of each Manager	ing Member(s): or Managing Member is as follows: FILED
Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	2005 DEC 19 P 2: 03
	SECRETARY OF STATE
"m๏๙"	OCIANDO RIJULAHASSEF FINBINA
	3583 COLIOY RO ULIT ITA
	001 2 33839
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11101111	2901 CATCLAGE CF
	St Cloup PL 34772.7465
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(Use attachment if necessary)	
	one la financia de la compositation
ARTICLE V: Effective date, if other than the date	ate of filing: 1-1-06 (OPTIONAL)
o or 90 days after the date of filing.)	specific and cannot be more than five business days prior
or or so days area the nate of timig.	
<u>REQUIRED</u> SIGNATURE:	(
/ /	· / / ·
	/_ / /
Simple of a manhan	of an authorized representative of a member.
	on 608.408(3), Florida Statutes, the execution ites an affirmation under the penaltics of perjury
that the facts stated her	rein are true.)
Griand	3 Rivern
Type	ed or printed name of signce

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)