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(Daywarda Nama)
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(Address)
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PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Cawleya Maragement 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:
W.C. Keith (Name of Person)
CUCKING & GSDC INC. (Firm/Company)
1722 Staysail Dr. See 5
City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (SO) 653-468 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Street/Courier Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIN	ITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	AND RECEIVED
(Must end with the words "Limited Liability Company, "Limited Company" of the	tir 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 Ad	Iress:
113 Sollalvico Hoad 113 So Valvico El 33594 Valvi	Valvice Road
ARTICLE III - Registered Agent, Registered Office, & Re (The Limited Liability Company cannot serve as its own Registered Agent. You musiness entity with an active Florida registration.)	gistered Agent's Signature: ust designate an individual or another
The name and the Florida street address of the registered agen	i are:
Florida street address (P.O. Box N	OT acceptable)
City, State, and Zip	594
Having been named as registered agent and to accept service of liability company at the place designated in this certificate, registered agent and agree to act in this capacity. I further agrestatutes relating to the proper and complete performance of accept the obligations of my position as registered agent as	hereby accept the appointment as ee to comply with the provisions of all by duties, and I am familiar with and

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

The name and address of each Ma	anager or Managing Member is as follows:	
<u>Title:</u>	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGRM - Managing Member	and Jafter Load - Values FL 33598-	学生
MGR	Tazine Taffer = 113 So. Valvico Load & Valvico, FL 37594 ?	FILE 2 11 16
	and the second s	OR OF TO SERVICE OF THE SERVICE OF T
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		<u>:</u>
(Use attachment if necessary)		
RTICLE V: Effective date, if other than	the date of filing: (OPT	IONAL)
If an effective date is listed, the date must one 90 days after the date of filing.) REQUIRED SIGNATURE:	st be specific and cannot be more than five busine	ss days prio
	$\Omega I . I$	•
(/)	LINK.	خي ا
Signature of a me	mber or an authorized representative of a member.	•
of this document c	h section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury ted herein are true.)	
<i>(O, (</i>	Typed or printed name of signee	1
Filing Fees:	<u>.</u>	

ARTICLE IV- Manager(s) or Managing Member(s):

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