

LOG000021000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

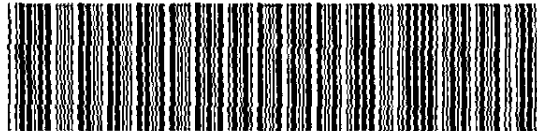
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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PLANNING & REGISTRATION

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LOG-21000
OR



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 9, 2006

ANTHONY FITZGERALD
7435 SW 170TH TERRACE
PALMETTO BAY, FL 33157

SUBJECT: ANGEL ROC CORPORATION L.L.C.
Ref. Number: W06000006418

We have received your document for ANGEL ROC CORPORATION L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORPORATION." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

Please return 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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 306A00009590

SECRETARY OF STATE
TAMMIE CLINE

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ANGEL ROC CORPORATION L.L.C.
(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:

ANTHONY FITZGERALD
(Name of Person)

(Firm/Company)

7435 SW 170th TERRACE
(Address)

PALMETTO BAY FLORIDA, 33157
(City/State and Zip Code)

For further information concerning this matter, please call:

ANTHONY FITZGERALD at (305) 794-8080
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ANGEL ROC ~~CORPORATION~~ LLC.

(Must end with the words "Limited Liability Company," "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:

ANGEL ROC ~~CORPORATION~~ LLC
7435 SW 170th Terrace
PALMIETTO BAY FLORIDA 33157

7435 SW 170th Terrace
PALMIETTO BAY FLORIDA 33157

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

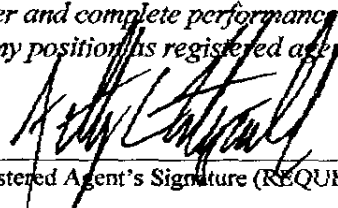
The name and the Florida street address of the registered agent are:

ANTHONY FITZGERALD
Name

7435 SW 170th TERRACE
Florida street address (P.O. Box NOT acceptable)

PALMIETTO BAY FL 33157
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..


Registered Agent's Signature (REQUIRED)

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SECRETARY
STATE
TALLAHASSEE
FLORIDA

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(CONTINUED)

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:

MGRM

ANTHONY FITZGERALD
7435 SW 170th Terrace
PALM BEACH GARDENS FLORIDA 33417

MGRM

NANCY NAVARRO
8801 SW 220th ST.
MIAMI FLORIDA 33190

(Use attachment if necessary)

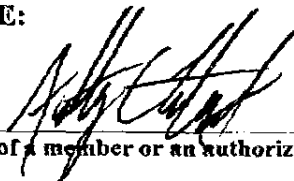
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SECRETARY OF STATE
NOTARIES REGISTRATION

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ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

ANTHONY FITZGERALD
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)