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PICK-UP WAIT MAIL
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COVER LETTER

Division of Corporations
SUBJECT: NOW YOU KNOW INVESTIGATIONS LLC (Name of Limited Liability Company)
(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:
The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Lus Hernandez (Name of Person)
Now You Know Investigations
(Firm/Company)
7211 N. Dale Mabry Huy. Ste. 222
Tampa, Florida 33614 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Luis Hernander at (813) 679-4423
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum \$130.00 Filing Fee \$\times \$\sum \$155.00 Filing Fee \$\times \$\sum \$160.00 Filing Fee,\$ Certificate of Status \$\times \$\text{Certified Copy} \\ (additional copy is enclosed) \$\text{Certified Copy} \\ (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLE I - Name: The name of the Limited Liability Company is: NOW YOU KNOW INVESTIGATIONS LC (Must end with the words "Limited Liability Company, "Ulimited Company" or their abbreviation "LLC," or "LC," or "

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

(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:

"MGR" = Manager "MGRM" = Managing Member	
MGRM	Luis R. Hernandez 6150 Brulletard Drive Wesley Chapel, FL. 3354
	THE STATE OF THE S
-	E FLORIB
(Use attachment if necessary)	
LE V: Effective date, if other than fective date is listed, the date mus days after the date of filing.)	the date of filing: (OPTIONA t be specific and cannot be more than five business day
-	
REQUIRED SIGNATURE:	0 1/ 0

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)

(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.)

R Hernandez
Typed or printed name of signee