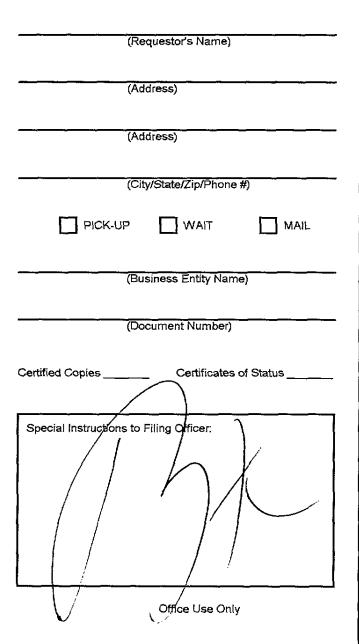
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ALLAHASSEE FLORICA

2005 MAR ILL AM ID: O.

FILED

COVER LETTER

	COVEN	LETTER		
TO: Registration Sec Division of Corp			\$ 50 M	WILL WOOD
SUBJECT: Referen	ce Only LLC			10
Separation .	(Name of Limited	d Liability Company)		B. O
	Organization and fee(s) are so	_		
Please return all correspo	ondence concerning this matte	r to the following:		,
Jan W. D. I				
	(I	Name of Person)		
	(Firm/Company)		
460 Base A	Avenue Apt#124			
	•	(Address)		
Venice, FL	34285			
<u>voince, i E</u>		/State and Zip Code)		
For further information of	concerning this matter, please	call:		
Jan W.D. IJpkem	eule	_{st.} 941) 650-247	9	
	of Person)	at (941) 650-247 (Area Code & Daytime To	elephone Number)	
Englosed is a sheek for	r the following amount:			
	_	□ #155 00 Pili F 8.	[7] \$1.60.00 Elling Fra	
1 \$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 Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns : Circle	

ARTICLE I - I	Name:	ON FOR FLORIDA LIMITED LIABILITY COMPANY
The name of the	e Limited Liability	Company is:
		The state of the s
Reference Only	LLC	100 m
(Must end with the w	vords "Limited Liability	Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II -	Address:	S.
		dress of the principal office of the Limited Liability Company is:
Principal Offic	e Address:	Mailing Address:
460 Base Avenue		460 Base Avenue
Apt# 124		Apt# 124
(The Limited Liabilit	ty Company cannot serve	venice, FL 34285 at, Registered Office, & Registered Agent's Signature: as its own Registered Agent. You must designate an individual or another
ARTICLE III (The Limited Liability business entity with	ty Company cannot serve an active Florida registr he Florida street ac	at, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ation.) Iddress of the registered agent are:
ARTICLE III (The Limited Liability business entity with	ty Company cannot serve an active Florida registr	at, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ation.) Iddress of the registered agent are:
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ARTICLE III (The Limited Liability business entity with	ty Company cannot serve an active Florida registr he Florida street ac Jan W. D. IJpko 460 Base Ave	at, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another action.) Iddress of the registered agent are: emeule Name
ARTICLE III (The Limited Liability business entity with	ty Company cannot serve an active Florida registr he Florida street ac Jan W. D. IJpko 460 Base Ave	at, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ation.) Iddress of the registered agent are: emeule Name Name
ARTICLE III (The Limited Liability business entity with	ty Company cannot serve an active Florida street active Florida street active Jan W. D. IJpke 460 Base Ave	at, Registered Office, & Registered Agent's Signature: e as its own Registered Agent. You must designate an individual or another ation.) Iddress of the registered agent are: emeule Name nue Apt# 124 Florida street address (P.O. Box NOT acceptable)

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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" = Man "MGRM" = M	ager anaging Member	
MGR		Jan W. D. IJpkemeule
		460 Base Avenue Apt#124
		Venice, FL 34285
(Use attachmen	nt if necessary)	
	• •	e date of filing: (OPTIONA
CLE V: Effectiv	ve date, if other than the	e date of filing: (OPTIONA be specific and cannot be more than five business day
CLE V: Effectiv	ve date, if other than the	
CLE V: Effective date is	ve date, if other than the	
CLE V: Effective ffective date is a days after the	ve date, if other than the listed, the date must be date of filing.)	
CLE V: Effective ffective date is a days after the	ve date, if other than the	
CLE V: Effective ffective date is a days after the	ve date, if other than the listed, the date must be date of filing.)	
CLE V: Effective ffective date is a days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE:	be specific and cannot be more than five business day
CLE V: Effective ffective date is a days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE:	
CLE V: Effective ffective date is a days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a memb	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury
CLE V: Effective ffective date is a days after the	ve date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member of this document cons	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)

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