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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: Registration Se Division of Co | | | |
|---------------------------------------|---|---|--|
| SUBJECT: | | overtuction, d Liability Company) | 2006 MAR 15 PM 4: 07 |
| The enclosed Articles of | f Organization and fee(s) are s | ubmitted for filing. | sser |
| Please return all corresp | ondence concerning this matte | er to the following: | T. F. |
| | Llovel 0 | C. (alindo) Name of Person) | ON ON OR |
| | All in or | 16. Coustrictio | u, US |
| | 4394 0 | W 128+4 Aug (Address) | • |
| | Hiraw | | 077 |
| For further information | concerning this matter, please | call: | |
| (Name | M. Galindo | at (786) 257- (Area Code & Daytime To | 7924 elephone Number) |
| Enclosed is a check for | or 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 Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301 | ns |

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 Company" or their abbreviation "LLC," or "LC **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 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: Carino H. Galindo Florida street address (P.O. Box NOT acceptable) 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)

(CONTINUED)
Page 1 of 2

| <u>Title:</u> "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
|--|---|
| MGR | Miguel C. Galindo 4304 SW 128+4 Ave Miramar, Fl 33027 |
| | |
| | 2006 MAR 15 Th |
| (Use attachment if necessary) | LORNO A |
| | (07070) |
| Tective date is listed, the date must | · · · · · · · · · · · · · · · · · · · |
| days after the date of filing.) REQUIRED SIGNATURE: | be specific and cannot be more than five business day |
| fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: | be specific and cannot be more than five business day |
| fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with of this document con | be specific and cannot be more than five business day |

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