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. (Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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EFFECTIVE DATE 05-15-04

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B. McKnight MAY 2 2 2006

## **COVER LETTER**

TO: Registration Section Division of Corporations			Ÿ
SUBJECT: American Biofuels (Nam	s, L.L.C. e of Limited Liabil	ity Company)	
The enclosed Articles of Organization and	fee(s) are submitte	d for filing.	
Please return all correspondence concernin	g this matter to the	following:	
Robert Hawker			
	(Name of	Person)	
	(Firm/Co	mpany)	
7570 Manasota Ke	•		
	(Addı	ress)	
Englewood, Florida		* ** *	
	(City/State an	la Zip Code)	
For further information concerning this ma	tter, please call:		
Robert Hawker	at ( 9	41 \ 421-99	52
(Name of Person)	at (	(Area Code & Daytime To	elephone Number)
Enclosed is a check for the following a	mount:		
\$125.00 Filing Fee \$130.00 Filing Fee Certificate of S	tatus Certi	155.00 Filing Fee & ified Copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ion porations	Street/Courier Addres Registration Section Division of Corporation 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:	FFFFFFFFF nerr
The name of the Emilion Educatory Company is:	Q5-15-06
American Biofuels, L.L.C. (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 prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7570 Manasota Key Road Englewood, Florida 34223	Same as Principal Office Address
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the register Manuel M	gistered agent are:  PH 12: 02
liability company at the place designated in the registered agent and agree to act in this capacity.	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all
	formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S  re (BEQUIRED)

(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:

MGRM	Robert S. Hawker		
	7570 Manasota Key Road		
	Englewood, Florida 34223		
Use attachment if necessary)			
ose attachment in necessary)			

**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.)

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)