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COVER LETTER

_	stration Section sion of Corporations
SUBJECT:	LO-LO Real Estate and Land Development, LCC. (Name of Limited Liability Company)
	(Name of Limited Liability Company)
The enclosed	Articles of Organization and fee(s) are submitted for filing.
Please return a	all correspondence concerning this matter to the following:
	Rastee Oce Jr.
, , , , , , , , , , , , , , , , , , , 	(Name of Person)
	LO-LO Real Estate and Land Development, LLC (Firm/Company)
	(Firm/Company)
_/4	9451 Sheridan Street Svite 104 (Address)
	(Address)
	Pembroke Pines, Florida 33332 (City/State and Zip Code)
	(City/State and Zip Code)
For further in	formation concerning this matter, please call:
Rasi	(Name of Person) at (678) 575-0940 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a	a check for the following amount:
□ \$125.00 Fi	ling Fee \$\sqrt{\$130.00}\$ Filing Fee & \$\sqrt{\$155.00}\$ Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$\sqrt{\$160.00}\$ Filing Fee, Certificate of Status & 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	T	I	\mathbf{C}	LE	I	-	ľ	I	a	m	e	:
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The name of the Limited Liability Company is:

LO-LO Real Estate and Land Development, LLC.

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

19451 Sheridan Street

Syite 104

Pembroke Pines, Flakion

Pembroke Pines, Flakion

Pembroke Pines, Florida 33332

Mailing Address:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual business entity with an active Florida registration.)	,
The name and the Florida street address of the registered agent are: OTOLIC Correct Name	FILED 06 JUN 21 AM 9: 30 SECRETAKY OF STATE TALLAHASSEE, FLORIDA

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:

Title: "MGR" = Manager "MGRM" = Managing Member	
"MBR" Raster Oce Jr. 19451 Sheridan Street Svite 100 Pembroke Pines, Florida 333	4 32
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date of filing: (OPTIONA (If an effective date is listed, the date must be specific and cannot be more than five business day to or 90 days after the date of filing.)	
REQUIRED SIGNATURE:	
Laterda) SECRE SECRE	; =
Signature of a member or an authorized representative of a member.	FIL
Radea One To	e 30

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)