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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

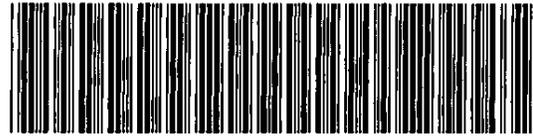
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/16/06--01030--013 **160.00

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

EFFECTIVE DATE
8/11/06

X

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sonia Money LLC
(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:

Sonia Money
(Name of Person)

Sonia Money LLC
(Firm/Company)

2436 Ave B SW
(Address)

Winter Haven, FL 33880
(City/State and Zip Code)

For further information concerning this matter, please call:

Sonia Money at (863) 307-4112
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 TALLAHASSEE FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Sonia Money LLC

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2436 Ave B, S.W
Winter Haven, FL
33880

2436 Ave B, S.W
Winter Haven, FL
33880

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:

Sonia Money
Name

2436 Ave B, S.W

Florida street address (P.O. Box **NOT** acceptable)

Winter Haven, FL 33880

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.

Sonia Money
Registered Agent's Signature (REQUIRED)

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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

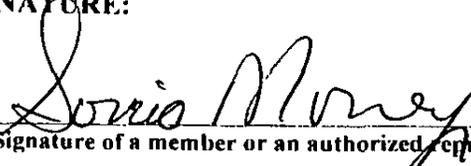
Name and Address:

_____	_____
_____	_____
_____	_____
_____	_____
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_____	_____
_____	_____

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 8-11-06 (OPTIONAL.)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Sonia Money
Typed or printed name of signee

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)

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IMPERIAL POLK COUNTY OCCUPATIONAL LICENSE



LICENSE / ACCT # 9970022832

LICENSE YEAR 9/30/2007

CLASS

LOCATION 2436 SW B AVE

EMPLOYEES

A

48 - WINTER HAVEN - IN - IN CITY

BUSINESS TYPE

OWNER: SONIA MONEY

230000 LTD CONSTRUCTION

SONIA MONEY

2436 SW B AVE

WINTER HAVEN - IN, FL 33880-0000

JOE G. TEDDER
TAX COLLECTOR
5028255.0001 of 0000
DATE 08/11/2006
Paid
F111
Oper
FEE: 30.00

LICENSE TYPE
BASE TAX

NEW LICENSE
30 00

DATE PAID:
PENALTIES:

ADDL. AMT. 30 00
TOTAL PAID:

JOE G. TEDDER, TAX COLLECTOR, 100 E MAIN ST, ROOM 12016, GARTOW, FL 33851, 2016, TEL: (869) 534-2731, www.PolkTaxes.com

THIS OCCUPATIONAL LICENSE MUST BE CONSPICUOUSLY DISPLAYED AT BUSINESS LOCATION

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