## L06000084148

(Re	equestor's Name)	
(Address)		
(Address)		
(Git	ty/State/Zip/Phone	<u>, #)</u>
(Cit	yrotate/21p/F110He	÷π)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	·
	·	-10-1-
Certified Copies	_ Certificates	or Status
Special Instructions to	Filing Officer:	
	)/(	

Office Use Only



500078978255

08/28/06--01001--008 \*\*125.00



OS AUG 25 PM 3: 10

PENAL OF STATE

ALLAHIE SEEPGRAJIONS

**CAPITAL CONNECTION, INC.**417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Walk-In

Will Pick Up

<u>s</u> a	
Engart's Improvements 10	ALL DANS SEE BY SEE
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
·	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
Signature	Vehicle Search
,	Driving Record
Requested by: $\omega = 1.5$	UCC 1 or 3 File
	UCC 11 Search
Name Date Time	UCC 11 Retrieval

Courier

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: ENYART'S IMPROVEMENTS 4,4,6
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  3500 N, KENDALL DRIVE # 285E MIANU  ARTICLE III - Registered Agent Registered Office & Registered Agent's Signature:  33/86
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:  JUPD ARONOWITZ  Name  1570 MADRUGA AUE # 311
Florida street address (P.O. Box NOT acceptable)  LORAL 6-ABLES FL 33/46
Cory, 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 60% F.S.  Registered Agent's Signature
Article IV - Management (Check box if applicable.)  The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.
(An additional article must be added if on effective date is requested)  Signature of a measurer 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.)
Typed or printed name of signee

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)