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COVER LETTER

TO:

Registration Section

Division of Corpora	tions		- .
SUBJECT: <u>Onyx</u>	INVESTME (Name of Limited	ENT CROUP I Liability Company)	·LLC.
The enclosed Articles of Org	anization and fee(s) are st	abmitted for filing.	
Please return all corresponde	nce concerning this matte	r to the following:	
<u>ADRIA</u>	A JEANT	Name of Person)	
	(Firm/Company)	
MAILI	16: 10.Box	30394 PALM B (Address)	CH GUNS FL 33400
STREET	= 14301 NW 16	State and Zip Code)	1 FL 33167
	- (City,	State and Zip Code)	
For further information conc	erning this matter, please	call:	
ADRIAN C	TEANTY	at (561) 6285 (Area Code & Daytime Te	ephone Number)
Enclosed is a check for the	e following amount:		
\$125.00 Filing Fee Co	\$130.00 Filing Fee & crtificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R D P.	failing Address egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center	8

Tallahassee, FL 32301



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART.	ICL	ÆΙ	- N	ame:
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The name of the Limited Liability Company is:

ŧ	Bnyx	INVESTMENT	GROUP	LLC.	
(Must end	l with the word	s "Limited Liability Company, "Li	mited Company" or	their abbreviation	"LLC," or "L.C.,")
	CLE II - Ad iling addre	idress: ss and street address of the	principal offic	e of the Limit	ed Liability Company is:

Principal Office Address:	Mailing Address:		
14301 NW 16th COURT MIAMI FL 33/67	P.O. Box 30394 PALM BOH GARDENS FL 33420		
ARTICLE III - Registered Agent, Registered	d 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:

AORIAN TEANTY
Name

14301 NW 1644 COURT

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

MIAMI FL 33/67
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

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	ADRIAN JEANTY 14301 NW 16th COURT MIAM) FL 33167
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the d	ate of filing: 9/15/06 (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
ach	
Signature of a member	or an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated her	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)
ADRI	AN IEANTY
Type	d 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)