## 10000101001

Office Use Only



100080575971

10/16/06--01042--010 \*\*130.00

SECRETARY OF STATE OIVISION OF TORPOSATION



## **COVER LETTER**

TO: Registration Sec Division of Cor					
SUBJECT:	Lee Black (Name of Limited	Enterprise d Liability Company	25		
The enclosed Articles of	Organization and fee(s) are su	abmitted for filing.			
Please return all correspo	ondence concerning this matter	r to the following:			
	Lee F	3le ch			
		Name of Person)			
<del>41,41,44,21,44,21,44,44,44,44,44,44,44,44,44,44,44,44,44</del>	(1	Firm/Company)			
6710 Chelsea St.					NG S
_		(Address)		90	SEC
Pensacola FL 32506 (City/State and Zip Code)					GF C
•	/ (City/	/State and Zip Code)		PH	30
For further information concerning this matter, please call:					E STA
23					
(Name of Person)  (Area Code & Daytime Telephone Number)					
(Name	of Person)	(Area Code & Daytime Te	lephone Number)		
Enclosed is a check fo	r 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 Certificate of State Certified Copy (additional copy is end	us &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	s		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:			
Lee Black Enter			
(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 print	ncipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
6710 Chelsea St Pensacola, FL 32506	6710 Chelsea 57. Pensacola, FL 32506		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another		
The name and the Florida street address of the re			
6710 Chels	ea 97 ess (P.O. Box NOT acceptable)		

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

## The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: \_\_\_ (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.) to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member of 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

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee