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(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	;#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doe	cument Number)	<u> </u>
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE OIVISION OF CORFORATIONS



COVER LETTER

⊅το:	Registration Solution of Co				
SUBJE	ССТ:	Ed & Sons LLC (Name of Limite	d Liability Company)		
The end	closed Articles o	f Organization and fee(s) are s	submitted for filing.		
Please	return all corresp	condence concerning this matte	er to the following:		
	Er	c Edward Cacho (Name of Person)		 .
	Eđ	& Sons LLC	(Firm/Company)		20,5
	13()4 Beverly St.	<i>гини</i> со прану)		2006 NOV 20 PM 2 31
•		of Develly Se.	(Address)		-3 5
	Fo ₁	rt Walton Bch. Fl	lorida 32547		PH 2:
		(City	/State and Zip Code)		<u> </u>
For furt	ther information	concerning this matter, please	cali:		·
Eri	c Edward		at (850) 543- (Area Code & Daytime To	1384	
	(Name	of Person)	(Area Code & Daytime To	elephone Number)	
Enclos	ed is a check fo	or 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 Status Certified Copy (additional copy is enclosed)	s &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	is:	
Ed & Sons LLC		
(Must end with the words "Limited Liability Company, "Lia	mited Company" or their abbreviation "LLC," 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:	
_1304 Beverly St.	Same as office	
Fort Walton Bch.		•
Florida 32547		
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.)	red Office, & Registered Agent's Signature: rgistered Agent. You must designate an individual or another	
The name and the Florida street address of th	e registered agent are:	5
Eric_Edware	d Cacho	_
Nar		1
_ 1304 Beverly S	t.	
	address (P.O. Box NOT acceptable)	
Fort Walton Bc	h. FL 32547 ω ΞΞ	
•	e, and Zip	
Having been named as registered agent and t	to accept service of process for the above stated limited	

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:

"MGR" = Manager "MGRM" = Managing Mer	mhae	
MGR — MGR	noci	Eric Edward Cacho
		Fort Walton Bch.Fl. 32547
		· ·
**	у)	
Use attachment if necessar		
LE V: Effective date, if other		te of filing: (OPTI
LE V: Effective date, if other	ite must be sp	te of filing: (OPTI pecific and cannot be more than five busines
LE V: Effective date, if other fective date is listed, the dated days after the date of filing	ite must be sp g.)	
	ite must be sp g.)	

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)

Eric E. Cacho

that the facts stated herein are true.)

Typed or printed name of signee