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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	riling Unicel.	
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Office Use Only



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SECRETARY OF STATE
TALL AHASSEE FLORIDA



COVER LETTER

TO: Registration Secti Division of Corpo				
SUBJECT: Tooi	Angi Ent	Provises U d Liability Company)	<u>C</u>	
The enclosed Articles of O	rganization and fee(s) are so	ubmitted for filing.		
Please return all correspon	dence concerning this matte	r to the following:		
Wilbert Doyalas				
(Narhe of Person)				
····				
	(Firm/Company)	O7, SEC	
-6880	P WM	oth Court	ARE JAN	
		(Address)	RY SSE	
Calidor	bill, FC	33319	_	
-	(City/	State and Zip Code)	FAT	
For further information cor	ncerning this matter, please	cail:	7 0 _A	
Wilbert	Dogglas Person)	at (Area Code & Daytime Te	3 2803 dephone Number)	
Enclosed is a check for t	he 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 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:				
Toni Angi Enterprises U.C. (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 principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:			
6280 NW 46th (art	C880 N. J. 46th Court			
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 of another business entity with an active Florida registration.)				
The name and the Florida street address of the registered agent are:				
Wiltert Do	th Court			
6886 Nw 40 Florida street addr	sth Court Sess (P.O. Box NOT acceptable)			
City, State, an	FL 33319. d 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 "MGRM" = Managing Member	Name and Address:
MGR	Wilbert Douglas 6880 NIS 46th Court Lauderhill FC 33819
MGR	HYACINTH Douglas 6880 NW york Court Lauderhy, FC 38319
	SECRETANIAS STATEMENT OF THE SECRETARIAN S
(Use attachment if necessary)	AM II: 27 OF STATE EF FLORIDA
RTICLE V: Effective date, if other than the f an effective date is listed, the date must be or 90 days after the date of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a member	r or an authorized representative of a member.
(In accordance with sec	etion 608.408(3), Florida Statutes, the execution statutes an affirmation under the penalties of perjury

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)