## 1070000/5708

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	<u></u>
(Ci	ty/State/Zip/Phone #	<u> </u>
•	•	
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Name)	
(Do	ocument Number)	
Cartified Canies	Cortification of	Chahua
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Division of Corp	porations					
SUBJECT: Berkele	y Resources, LLC					
SOBJECT.	(Name of Limited	l Liability Company)				
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.				
Please return all correspo	ondence concerning this matte	r to the following:				
Faye Barka	n					
<u>,,</u>		Name of Person)				
<del></del>	(	Firm/Company)			<del></del> -	. <u></u>
154 Barbei	rry Ln			SE	07	
	<del></del>	(Address)	-	AHE	FE	8
Ponte Ved	ra Beach, FL, 320	082		ASS:	3-9	2000
	(City	/State and Zip Code)		The state of the s	2	
For further information of	oncerning this matter, please	call:		STATE	PH 4: 42	
Faye Barkan		at (904 ) 373-038	3			
(Name	of Person)	(Area Code & Daytime T	elephone Numbe	ल)		-
Enclosed is a check for	the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Certificate Certified C (additional co	of Status Copy	&	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

THE HAIRE OF THE	Limited Liability Compar	19 13.		
Berkeley Resour	ces, LLC			
(Must end with the wo	rds "Limited Liability Company, "	"Limited Company" or their abbreviation	on "LLC," or "L.C.,")	
ARTICLE II - A	\ddress•			
		he principal office of the Lim	ited Liability Compan	y is:
-		•	,	-
Principal Office	Address:	Mailing Address:		
154 Bayberry Ln				
Ponte Vedra Beach,	FL 32082		Sis	
(The Limited Liability business entity with a	Company cannot serve as its own an active Florida registration.) e Florida street address of Faye Barkan		Agent's Signature: an individual of STATE ASSESSED ASSESS	
	I	Name		
	154 Barberry Ln			
	Florida stre	et address (P.O. Box NOT accepta	ble)	- ··,
	Ponte Vedra Beach,	FL 32082		
	City, S	tate, and Zip	•	
liability comp registered agent statutes relatin	oany at the place designated and agree to act in this cap g to the proper and comple	d to accept service of process y d in this certificate, I hereby ac pacity. I further agree to comp ete performance of my duties, a registered agent as provided f	ccept the appointment a ly with the provisions o and I am familiar with a	as of all and

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	•
Widdle Wanaging Weineer	
MGRM	Faye Barkan
	154 Barberry Ln
	Ponte Vedra Beach, FL, 32082
MGRM	Michael Barkan
WO! W	154 Barberry Ln
	Ponte Vedra Beach, FL, 32082
•	
	<del></del>
	an the date of filing: (OPTIONA ust be specific and cannot be more than five business day.
uays after the date of thing.	7
DESTINED GIGNI MINE	O; PLL
REQUIRED SIGNATURE:	22 2
THE CASE OF THE CASE	
333,411	THASSE HASSE
-/a	y Sarkan SSET
-/a	number or an authorized representative of a member.
Signature of a r  (In accordance wo of this document	with section 608.408(3), Florida Statutes, the execution of the constitutes an affirmation under the penalties of perfute stated herein are true.)
Signature of a r  (In accordance wo of this document	with section 608.408(3), Florida Statutes, the execution of the constitutes an affirmation under the penalties of perfut.

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)