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Special Instructions to I	Filing Officer:	
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Office Use Only



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COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: Janeen Murray, LCC (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Janeer Murray (Name of Person)
7s 29
(Firm/Company)
8856 SW RABBIT TRAIL
ARCADIA, FC 34266 City/State and Zip Code) Recording Property Pr
For further information concerning this matter, please call:
Janeer Murray at (863) 990-6105 (Name of Person) at (863) 990-6105 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum_{\text{S130.00}} \\$130.00 Filing Fee & \sum_{\text{S155.00}} \\$155.00 Filing Fee & \sum_{\text{S160.00}} \\$160.00 Filing Fee, Certificate of Status & 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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	EI-	Name:
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The name of the Limited Liability Company is:

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:	200°	
8856 SW Rabbit Trail ARCADIA, FL 34266	ARCADIA, FL	RABBITTRAL 342665	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered red Agent. You must designa	Agent's Signature: 722	

The name and the Florida street address of the registered agent are:

Name

Name

Name

Name

Name

RABBIT TRAIL

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

Arcadia FL 34266

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

22207

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MG-R

Janeen Muscay

8856 Sw Rabbittra

Alcadia, FL 34246

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 2/22/2007 (OPTIONAL)

(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.)

REQUIRED SIGNATURE:

Signature of a member or 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.)

Ineen Murray
Typed 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)