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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO: Registration Se Division of Co				
SUBJECT: Korey		d Liability Company)		
The enclosed Articles of	f Organization and fee(s) are so	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	r to the following:		
Korey Lus	ster			
<u></u>		Name of Person)		
				07
	(	Firm/Company)		O7 HAY -4 AM 11:20  RECREASSE OF STATE RALLAHASSE FLOPID
6298 Breckenridge Circle				是 是
<del>,</del>	· · · · · · · · · · · · · · · · · · ·	(Address)		ER H
Lake Wo	orth, FL 33467			STA STA
	(City	/State and Zip Code)		を の
For further information	concerning this matter, please	call:		
Donna Kimme	rly	at ( 561 ) 596-10	98	
	of Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a check for	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 Statu Certified Copy (additional copy is encl	s &
	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 · Circle	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	•	
The name of the Limited Liability Company is	<b>:</b> :	
Korey Luster, LLC		
(Must end with the words "Limited Liability Company, "Limited Liability Company,"	ited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address:		
	principal office of the Limited Liability Company is:	
	•	
Principal Office Address:	Mailing Address:	
6298 Breckenridge Circle	Same as Principal Office Address	
Lake Worth, FL 33467	- St.	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)  The name and the Florida street address of the	istered Agent. You must designate an individual or another	
Korey Luster		
, ivanii		
6298 Breckenridge Circle		
Florida street a	ddress (P.O. Box <u>NOT</u> acceptable)	
Lake Worth	FL 33467	
City, State	, and Zip	
<b>9 9 9</b>	o 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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Korey Luster 6298 Breckenridge Circle Lake Worth, FL 33467 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (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

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)

Korey Luster

that the facts stated herein are true.)

Typed or printed name of signee