# L01000051505

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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# **COVER LETTER**

TO:

Registration Section

Division of Co	orporations		
SUBJECT:	Redfire	web LLC	
	(Name of Limite	d Liability Company)	······································
The enclosed Articles	of Organization and fee(s) are s	ubmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
Robert Est			
	(	Name of Person)	•
Redfirewe	b LLC		,
		(Firm/Company)	
840 South	n Military Trail		TAI S
		(Address)	CR I
Deerfield	Beach, Fl. 33442		AY I
	(City	/State and Zip Code)	mo n
Far Simbon in Samuration		11-	of SI
For further information	concerning this matter, please	can:	2: 1 STATE LORIC
Robert Estrada		at ( 954 ) 914-16	37 · Þ · –
(Nam	e of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check t	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)	\$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 Addr Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
340 South Military Trail	840 South Military Trail
Deerfield Beach, Fl. 33442	Deerfield Beach, Fl. 33442
<u> </u>	700 ZE
business entity with an active Florida registration.)  The name and the Florida street address of the re  Robert Estrada  Name	egistered agent are:  RY OF STATE SEE: FLORIDA
840 South Military Trail	В —
	ress (P.O. Box NOT acceptable)
Deerfield Beach, City, State, a	FL 33442 nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Manager	ing Member	Name and Address:	
MGR		Robert Estrada	
		840 South Military Trail	
		Deerfield Beach, Fl. 33442	
		<u> </u>	一声描写 一
MGRM		Rene Guillen	DR =
		655 96 St	## <b>#</b>
		Bal Harbour,Fl. 33154	- <del>()</del>
			- TTI
MGRM		Paul Eppler	지역 전
		655 96 St	1021 13
		Bal Harbour,Fl. 33154	===
			7
MGRM		Gary Fiorito	
		840 South Military Trail	
		Deerfield Beach, Fl. 33442	
	,		
` LE V: Effective dat fective date is listed days after the date	i, the date must of filing.)	ne date of filing: be specific and cannot be more	. (OPTIO
ffective date is listed days after the date REQUIRED SIGN	I, the date must of filing.) NATURE:		e than five business of
LE V: Effective dat ffective date is listed days after the date  REOUIRED SIGN  Si	i, the date must of filing.)  NATURE:  ignature of a meminaccordance with	be specific and cannot be more ber on an authorized representative section 608.408(3), Florida Statutes, the stitutes an affirmation under the pena	e than five business of a member.
LE V: Effective dat fective date is listed days after the date REQUIRED SIGN  Si (1	i, the date must of filing.)  NATURE:  ignature of a meminaccordance with secondance with secondance contains the desired contains the	be specific and cannot be more ber on an authorized representative section 608.408(3), Florida Statutes, the stitutes an affirmation under the pena	e than five business of a member.

## 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)