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DIVISION OF CONCENTRAL

COVER LETTER

Registration Section

TO:

Division of Corporations	
SUBJECT: E1-Dorado Commercial Ventures LLC (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:	
Antony Nguyen (Name of Person)	
(Name of Person)	
(Firm/Company)	
10224 Memorial Hwy (Address)	· _
97	SIA
Tampa, FC 33815 E (City/State and Zip Code)	· 로돌
(City/State and Zip Code)	무증무
	25 E
For further information concerning this matter, please call:	987A
For further information concerning this matter, please call: Andony Mayer at (8/3) 447-4434	FILED STATE OF CORPORATIONS
(Name of Person) at (813) 447-4434 (Area Code & Daytime Telephone Number)	တ
Enclosed is a check for the following amount:	
\$125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
El-Dora do Commercial Ventures LLC (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:
10224 Memorial Huy POBOX 260361 Tampa, FL 33615 Tampa, FL 33685
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 or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Antony Nauyen Name 10224 memorial Hay
The name and the Florida street address of the registered agent are:
Antony Naugen Name 10224 Memorial Hay 5
Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
Tampa FL 33615 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 a 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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MER	Antony Hauyen PO Box 260361 Tampa, FL 33685
MERM	Huong Chau PO BOX 260361 Tampa, FC 33685
m GR M	Johnny Chau PO Box 260361 Tampa, FC 33685
MERM	Tam Mauyen PO Box 260361 Tampa, FL 33685
(Use attachment if necessary)	
LE V: Effective date, if other than the fective date is listed, the date must be	e date of filing: (OPTIC

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

REQUIRED SIGNATURE:

, , j

Signature of a member of 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.)

Antony Navyen
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)