# 07000072692

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DIVISION OF CORPORATION OF JUL 12 PM 2: 50

# **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJ:	Sahara Import Enterprises, LLC	
	(Name of Limited Liability Company)	
The er	nclosed Articles of Organization and fee(s) are submitted for filing.	
Please	e return all correspondence concerning this matter to the following:	
	Martina Harris	
	(Name of Person)	
	Sahara Import Enterprises, LLC	
	(Firm/Company)	9
	P. O. Box 65462	ECRE 1510H
	(Address)	97
	Orange Park, Florida 32065	Jones C
	(City/State and Zip Code)	上 字 字
For fu	arther information concerning this matter, please call:	SECRETARY OF 2: 50
Ma	rtina Harris at (610 ) 764-9972	
	(Name of Person) (Area Code & Daytime Telephone Number)	
Enclo	osed is a check for the following amount:	
<b>]</b> \$125	5.00 Filing Fee \$\begin{array}{ c c c c c c c c c c c c c c c c c c c	
	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

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Sahara Import Enterprises, LL	.C
(Must end with the words "Limited Liabili	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	incipal office of the Limited Liability Company is:
D	N/ 112 A 13
Principal Office Address:	Mailing Address:
C/O 628 Chestwood Chase Drive	P.O. Box 65462
Orange Park, Fl. 32065	Orange Park, Fl. 32065
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Adetunji Adekola	chase Dr
Name	DE TETTA
628 Chestwood C	chase Dr. 2 CXH
Florida street add	Iress (P.O. Box NOT acceptable)
Orange Park,	FL 32065 22: 50 William Part
City, State, a	and Zip O 55

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 myposition as registered agent as provided for in Chapter 608, F.S.

Pagistared Agent's Signature (PEOLUPED

(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:

MGRM	Adetunji Adekola
	P.O. Box 65462 Orange Park, FI 32065
MGRM	Martina Harris
	P. O. Box 65462
	Orange Park, FI 32065
<del></del>	07 JUL 12
(Use attachment if necessary)	ne date of filing: (OPTIONAL) be specific and cannot be more than five business days p

### **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.)

## Martina Harris

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)