(Requestor's Name)	
(Address)	600106
(Address)	
(City/State/Zip/Phone #)	07/30/07
(Business Entity Name)	
(Document Number)	
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: ENP MAINTENANCE AND MANAGEMENT L.L. (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:
STEPHEN VINCENTI (Name of Person)
EVP MAINTENANCE AND MANAGEMENT L.L.C. (Firm/Company)
234 MERIVIAN AVE APT 6 (Address)
MIAMI BEACH FL 33/37 3 (City/State and Zip Code)
For further information concerning this matter, please call:  STEVE VINCENT( at (305) 673 - 073
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee,  Certificate of Status Certified Copy Certificate of Status & Certified Copy  (additional copy is enclosed)  (additional copy is enclosed)
Mailing Address Registration Section Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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:		
EVP MAINTENANCE AND MANAGEMENT L.C.C. (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:		
Principal Office Address:  Mailing Address:		
234 MERIDIAN AVE  "APT ** 6  MIAMI BEACH FL 33/39  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:  STEPHEN VINCENTI HARRY OF STAIR Name  234 MERIDIAN AVE APT OF STAIR Florida street address (P.O. Box NOT acceptable)  REPART OF STAIR ORDER  MIAMI REACH FL. 33139 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

## 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 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_\_\_ (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.)

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)

EPHEN VINCENT 1
Typed or printed name of signee