10100182164

Yahia Asad (Requestor's Name)
P.O. Box 13 148 (Address)
(Address) [Address] [City/State/Zip/Phone #)
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SECHETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
BUSY BOY MART, LLC (Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
16751 N.E. S.R. 65 HOSFORD, FL 32334	P.O. BOX 13148 TALLAHASSEE, FL 32317-3148
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
YAHIA ASAD Name	O7 AUG 10 RCLE NE #101
3305 CAPITAL CI	ress (P.O. Roy NOT acceptable)
TALLAHASSEE City, State, as	FL 32308
liability company at the place designated in th	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of al

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:

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	YAHIA ASAD	
	3305 CAPITAL CIRCLE NE #205	
	TALLAHASSEE, FL 32308	
(Use attachment if necessary)		
(Ose attachment if necessary)		
ARTICLE V: Effective date, if other than the	date of filing: (OPTIONA	L)
(If an effective date is listed, the date must b	e specific and cannot be more than five business day	s prior
to or 90 days after the date of filing.)	•	•
<u>REQUIRED</u> SIGNATURE:		
	1	
	√ 1.7⊃ ≥ e c	,
Signature of a member	er or an authorized representative of a member.	<i>:</i>
	£0. 6	
(In accordance with second this document const	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penaltics of perjury	
that the facts stated h	nerein are true)	4
YAHIA ASA	VD THE	
	ped or printed name of signee	
Filing Fees:	Dr. D	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)