L070000873999

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
LS				

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Effective Date Offollo

07/18/07--01019---024 **125.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Source of the second se

COVER LETTER

TO:	Registration Se Division of Cor					
SUBJE	SUBJECT: Erick Nagy Equine Bodyworks LLC.					
		(Name of Limited		uny)		
		Organization and fee(s) are su				
Please return all correspondence concerning this matter to the following: Erick Nagy						
	(Name of Person)					
Erick Nagy Equine Bodyworks LLC.						
	(Firm/Company)					
812 Hampton circle						
(Address)						
Naples,Fl. 34105						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
Erick	Nagy		at (239	273-6076	6	
	(Name of Person)		(Area Code & Daytime Telephone Number)		lephone Number)	
Enclos	sed is a check fo	or the following amount:				
\$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$\int \frac{1}{2} \frac			
*		Mailing Address Registration Section Division of Corporations P.O., Box 6327 Tallahassee, FL 32314	Registrati Division Clifton E 2661 Exc	ourier Addression Section of Corporation Building	- 95	



July 19, 2007

ERICK NAGY 812 HAMPTON CIRCLE NAPLES, FL 34105

SUBJECT: ERICK NAGY EQUINE BODYWORKS LLC.

Ref. Number: W07000034763

We have received your document for ERICK NAGY EQUINE BODYWORKS LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on July 18, 2007. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers Document Specialist

Letter Number: 707A00045670

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company	v is-			
	Effective Date			
	Elicetive Date O(10/10/1			
Erick Nagy Equine Bodyworks LLC.	(- 1			
Must end with the words "Limited Liability Company, "L	imited Company" or their abbreviation "LLC," or "L.C.,")			
ARTICLE II - Address:				
The mailing address and street address of th	e principal office of the Limited Liability Company is:			
Driveinal Office Address.	Mailing Address.			
Principal Office Address:	Mailing Address:			
B12 Hampton circle	812 Hampton círcle			
Naples, Fl. 34105	Naples, Fl. 34105			
business entity with an active Florida registration.) The name and the Florida street address of t Erick Nagy				
Na	ame			
812 Hampton circle				
	t address (P.O. Box NOT acceptable)			
Naples, Fl. 34105	ate, and Zip			
City, Su	au, an zip			
	l 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			
liability company at the place designated registered agent and agree to act in this cap	I in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all			
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet	I in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all be performance of my duties, and I am familiar with and			
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet	l in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all			
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet	I in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all be performance of my duties, and I am familiar with and			
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet	In this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S			
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as i	I in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all be performance of my duties, and I am familiar with and			

(CONTINUED)
Page 1 of 2

2007 AUG 24 AM 10: 49 SECRETARY OF STATE

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGR	Erick Nagy		
	812 Hampton circle		
	Naples, Fl. 34105		
(Use attachment if necessary) ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.)	be date of filing: 4th 9th, 2007 9/1/07 (OPTIONAL) be specific and cannot be more than five business days prior		
REQUIRED SIGNATURE:			
-5/	Way		
Signature of a memi	bor or an authorized representative of a member.		
of this document con	(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.)		
Erick Nagy	r regions are une.		
	Evned 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)

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