L07000094993

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	··· -
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	i
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





200109178112

09/17/07--01022--006 **160.00

07 SEP 17 AM 11.03

-- orn 18 2007

COVER LETTER

-	on Section f Corporations	
SUBJECT: Lone	ion Achievement Proces	ses, LLC
	(Name of Limit	ed Liability Company)
The enclosed Article	es of Organization and fee(s) are	submitted for filing.
Please return all con	respondence concerning this matt	er to the following:
Ric	k1 London	(Name of Person)
		(rame of roson)
London	Achievement Processes	
		(Firm/Company)
555	N. E. 34th Street, Su	uite 605
		(Address)
Mian	ni, Florida 33137	
		/State and Zip Code)
For further informati	on concerning this matter, please	call:
, F	licki London	at (305) 571–7816
1/4s	ime of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check	for the following amount:	
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & X \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	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 i	s:
London Achievement Processes, L (Must end with the words "Limited Lia	LC bility 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:
Suite 605 Miami. Florida 33137 ARTICLE III - Registered Agent, Registere (The Limited Limbility Company cannot serve as its own Registered Serve with an active Florida registration.) The name and the Florida street address of the	
	s registered agent are.
<u>Ricki London</u> Nam	HE .
555 N. E. 34th St	reet Suite 605
Florida street a	ddress (P.O. Box NOT acceptable)
<u>Mi</u> ami, City, State	FL 33137 c, and Zip
Haring have a sure of an area and a sure of a	

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" = Ma		
"MGKM" = 1	Managing Member	
MGR	}	Ricki London
	<u></u>	.555 N. E. 34th Street, Suite 605
		Miami Florida 33137
		• • • • • • • • • • • • • • • • • • • •
	•	
		
	·	
		
	·	
(Use attachme	ent if necessary)	
	•	
LE V: Effecti	ive date, if other than th	e date of filing: (OPTIONA
LE V: Effecti fective date is	ive date, if other than the	ne date of filing: (OPTIONAl be specific and cannot be more than five business day
LE V: Effecti fective date is	ive date, if other than th	ne date of filing: (OPTIONAl be specific and cannot be more than five business day
LE V: Effecti fective date is	ive date, if other than the	ne date of filing: (OPTIONAl be specific and cannot be more than five business day
LE V: Effecti fective date is days after the	ive date, if other than the listed, the date must be date of filing.)	ne date of filing: (OPTIONAl be specific and cannot be more than five business day
LE V: Effecti fective date is days after the	ive date, if other than the	ne date of filing: (OPTIONAl be specific and cannot be more than five business day
LE V: Effecti fective date is days after the	ive date, if other than the listed, the date must be date of filing.)	ne date of filing: (OPTIONAl be specific and cannot be more than five business day
LE V: Effecti fective date is days after the	ive date, if other than the listed, the date must be date of filing.) SIGNATURE:	be specific and cannot be more than five business day
LE V: Effecti fective date is days after the	ive date, if other than the listed, the date must be date of filing.) SIGNATURE:	be specific and cannot be more than five business day
LE V: Effecti fective date is days after the	ive date, if other than the listed, the date must be date of filing.) SIGNATURE: Signature of a member	be specific and cannot be more than five business day One of a member.
LE V: Effecti fective date is days after the	ive date, if other than the listed, the date must be date of filling.) SIGNATURE: Signature of a member (In accordance with se	be specific and cannot be more than five business day ber or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution
LE V: Effecti fective date is days after the	ive date, if other than the listed, the date must be date of filling.) SIGNATURE: Signature of a member (In accordance with se	be specific and cannot be more than five business day ber or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury
LE V: Effecti fective date is days after the	ive date, if other than the slisted, the date must be date of filing.) SIGNATURE: Signature of a member of this document const	be specific and cannot be more than five business day ber or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury lherein 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)