## L0700004874

i	
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	
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SECRETARY OF STATE
AND ASSEFT FLORIDA

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## **COVER LETTER**

' TO: Registration Se Division of Cor				
SUBJECT: 46	N Enterpris	es LLC Liability Company)		
The enclosed Articles of	Organization and fee(s) are sub	mitted for filing.		
Please return all correspo	endence concerning this matter t	to the following:		
Lawr	ence Gregor	y Neill me of Person)	Sec. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	_
	N Enter	m/Company)	.,,	
		·····		
<u>712</u>	Pine Shores	Circle	5	
Neu	Smyrna B	(Address)	2/6 <del>2</del> 5 5 6 7	1
	(City/St	ate and Zip Code)	15 ARY SSE	
For further information c	oncerning this matter, please ca	11:	ARY OF STATE SSEE, FLORIGE	5
Lawrence	e Neill at	(Area Code & Daytime Te		
Enclosed is a check for	the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 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 Corporation Clifton Building 2661 Executive Center ( Tallahassee, FL 32301	as	