## 108000002435

(Requestor's Name)
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,
(City(Chata/Tip/Dhana 40)
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PICK-UP WAIT MAIL
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(Document Number)
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SECRETARY OF STATE DIVISION OF CORPORATION

J. BRYAN

JAN - 8 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Division of C			
SUBJECT:	Smokin St (Name of Limit	togies LLC	
	(Name of Limit	ted Liability Company)	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	spondence concerning this mat	tter to the following:	
	Edward E.	Smith, III	
		(Name of Person)	OF THE BOARD POLICE OF
		-	
		(Firm/Company)	ي الله
	781 Kangaro	O COUY+ (Address)	<b>2</b> 3
	J	(Address)	£. 0
	Deltona FL	32738 ty/State and Zip Code)	*
	(Cit	ty/State and Zip Code)	
For further information	n concerning this matter, please	e call:	
Edwara E	. Smith TIT e of Person)	at ( 407 ) 221 - OI (Area Code & Daytime Tele	phone Number)
Enclosed is a check f	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 Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	
	A		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Mu	st end with the words "Limite	Stogic ed Liability Comp	SLLC any, "L.L.C.," or "LLC	
ARTICLE II - Ad	dress:			ited Liability Company is:
Principal Office A	ddress:	<u>Mail</u>	ing Address:	
781 Kangar Deltona Pl	00 G. 32738			
(The Limited Liability Co	egistered Agent, Regionpany cannot serve as its own ctive Florida registration.)			
The name and the I	Florida street address o	of the registere	ed agent are:	
	<u>Edward</u> E.	Smith, Name	Ш	
	781 Kang Florida st	arco Cou	ur+ D. Box <u>NOT</u> acceptab	ole)
	De Itana	FL State, and Zip	32738	
	City,	•		

all accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

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

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

"MGR" = Manager	Name and Address:
"MGRM" = Managing Membe	r
mgRm	Edward E. Smith, III
	781 Kangaroo Ct.
	Del tona tr. 32739
mGRm	781 Kangaroo Gt. Deltona FL 32738  Christopher Marimon 157 Cedar Ridge Lane Sanfora FL 32771  Gregory T. Sutton
	157 Cedar Ridge Lane
	Sanford FL 32771
mgrm	Gregory I. Sutton
	123 Kelly Cicle
	Senford FL 32773
(Use attachment if necessary)	
(Ose attachment if necessary)	
•	an the date of filing: (OPTIONAL)
LE V: Effective date, if other th	nan the date of filing: (OPTIONAL)  nust be specific and cannot be more than five business days r
LE V: Effective date, if other th	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days p
LE V: Effective date, if other the	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days p
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.)	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days p
LE V: Effective date, if other the fective date is listed, the date in	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days p
LE V: Effective date, if other the frective date is listed, the date in days after the date of filing.)	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days p
LE V: Effective date, if other the ffective date is listed, the date is days after the date of filing.)  REQUIRED SIGNATURE:	nust be specific and cannot be more than five business days p
LE V: Effective date, if other the fective date is listed, the date is days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a	nust be specific and cannot be more than five business days proceedings of a member.
LE V: Effective date, if other the fective date is listed, the date is days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a (In accordance)	member or an authorized representative of a member.  with section 608.408(3), Florida Statutes, the execution
LE V: Effective date, if other the ffective date is listed, the date is days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a (In accordance of this document)	nust be specific and cannot be more than five business days proceedings of a member.

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)