## 108000009370

(Requestor's Name)		
(Address)		
(Address)		
(**\dainboo)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
•		
(Business Entity Name)		
<b>(</b>		
(0		
(Document Number)		
Certified Copies Certificates of Status		
Constitution to Siling Officer		
Special Instructions to Filing Officer:		
<b>,</b> '		

Office Use Only

JOB - 9310



100115477411

01/28/08--01004--004 \*\*125.00

OBJAN 28 AM 9: 50

OB JAN 28 AM 9: 54 SECKLIARY OF STAND

M. Thomas JAN 28 2003

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: (Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
TERRYE. THRISHER		
T.V. Paintine		
(Firm/Conpany)		
91. Fin Uft' Rd		
(Address)		
Chattahoocher TL. >2324 == =		
For further information concerning this matter, please call:		
TERRY THR H Shevat (S50) SCL0-52 ST (Name of Person) (Area Code & Daytime Telephone Number)		
(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)		
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	1 f
(Must end with the words "Limited Liabhi	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
D ' ' 100" A11	
Principal Office Address:	Mailing Address:
91. FINDER RO	SSE B
Chatichochee FL.	SAMO
<del></del>	5
ARTICLE III - Registered Agent, Registered	
(The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
business energy with an active thorica registration.)	,

The name and the Florida street address of the registered agent are:

Name Name

Florida street address (P.O. Box **NOT** acceptable)

City, State, and Zit

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)

The name and address of each Manager of	or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" ➤ Managing Member	Name and Address:
Victor Smith	Chattahacheete
Victor Smith	1795 DESAIX TAL FL 32303
· · · · · · · · · · · · · · · · · · ·	AND AND TO
	ASSET S 9
(Use attachment if necessary)	ORIE
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	e of filing: (OPTIONAL) secific and cannot be more than five business days prior
REQUIRED SIGNATURE:	A 1
Signature of a member or	an authorized representative of a member.
of this document constitute that the facts stated herei	or printed name of signee

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

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)