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Special Instructions to Filing Officer:

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**EXAMINER** 

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SECRETARY OF STATE

# COVER LETTER

	egistration Se ivision of Cor						
SUBJECT: Leon A Pasternak LLC							
(Name of Limited Liability Company)							
The enclos	ed Articles of	Organization and fee(s) are	submitted for fili	ng.			
Please retu	rn all correspo	ondence concerning this mat	ter to the followin	ıg:			
Le	on A Pa	sternak					
(Name of Person)							
Le	eon A Pa	sternak LLC					
(Firm/Company)							
283 17th St NE							
<del></del>			(Address)	· -			
W	inter Hav	en FL 33881					
(City/State and Zip Code)							
For further	· information c	oncerning this matter, pleas	e call:				
Leon A	A Pasterr	nak	at ( 863	, 2	293-7347	7	
	(Name of Person)			ode &	Daytime Tele	phone Number)	
Enclosed	is a check for	r the following amount:					
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified C (additional co	ору		\$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				

## Articles of Organization for

#### Leon A Pasternak LLC

#### ARTICLE I – Name

The name of the Limited Liability Company is Leon A Pasternak LLC.

#### ARTICLE II - Address

The mailing address of the Limit Liability Company is 283 17<sup>th</sup> St NE, Winter Haven FL 33881. The principal office address of the Limited Liability Company is 283 17<sup>th</sup> St NE, Winter Haven FL 33881.

### ARTICLE III - Registered Agent, Registered Office

The name and the Florida street address of the registered agent are Leon A Pasternak, 283 17<sup>th</sup> St NE, Winter Haven FL 33881.

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.

gistered Agent's Signature

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

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

MGR: Leon A Pasternak 283 17<sup>th</sup> St NE Winter Haven FL 33881

SECRETARY OF STATE

# ARTICLE V – Effective Date

The effective date of this limited liability company is 8 day of February, 2008.

ignature of a member or an authorized epresentative of a member.

Leon A Pasternak

Typed or printed name of signee

Signature of a member or an authorized Representative of a member.

Typed or printed name of signee

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# **STATEMENT OF OWNERSHIP**

This certifies that I, Leon A Pasternak, am a member or managing member of Leon A Pasternak LLC.

I own 100% of the units issued by the Limited Liability Company listed above.

Affidavit of Applicant: I certify that the information contained herein is true and correct to the best of my knowledge.

(PRINT NAME)

(APPLICANT'S SIGNATURE)

(DATE)

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