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SECRETARY OF STATE
SECRETARY E, FLORIDA

T. CLINE

MAR 18 2008

EXAMINE

COVER LETTER

Division of Cor				
SUBJECT:F	ONTANA FMPU (Name of Limited	RTS, LLC		
	(Name of Limited	Liability Company)		
The enclosed Articles of	Organization and fee(s) are su	bmitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
·	Rochelle	Kerner, Esq.		
	law office of	f Rochelle Ke irm/Company)	thet	
		ngraham Ave, (Address)		
	Delray B	each, F/ 3348	?3	
	/ (City/S	State and Zip Code)		
For further information o	oncerning this matter, please o	all:	2008 SE TAL	# 14
Rochelle	Kernet	at (<u>56 /</u>) <u>272</u> (Area Code & Daytime Tele	- 9/20 AR R	TILE
Enclosed is a check for		(SECRE JARY OF STALLAHASSEE, FLORE STALLAHASSEE	
	_/ _	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Box Certificate of Statis & 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		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited Liability 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:
5070 FORSYTHIA STREET Same DELRAY BEACH, FI 33484 ATT: SANDRA MYERS
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
The name and the Florida street address of the registered agent are: ROCHELLE KERNER ESQ Name Name
Florida street address (P.O. Box NOT acceptable) Name Name Name Not Not
DERAY BEACH FL 33483 City, State, and Zip
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

(CONTINUED) Page 1 of 2

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Sandha Ryers 5070 Forsythia Street Delray Beach, Fl 33484
MGRM	Ellen Fontaka 14044 Marquesas Way, # W Marina Del Ry, California 90292
MGRM	Enzo Fontana 14044 Marquesas way, #D Marina Dei Rey, Ca 90292

(Use attachment if necessary) ARTICLE V: Effective date, if other than the d (If an effective date is listed, the date must be to or 90 days after the date of filing.)	late of filing: (OPTIONAL) To specific and cannot be more than five business days prior
<u>required</u> signature:	PH 2: 05 SEE. FLORIDA
Signature of a member	or an authorized representative of a member.
(In accordance with section of this document constituent that the facts stated here.)	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury rein are true.)
	ELLE KERNER ed or printed name of signee

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)