

Mar 24 2008 1:31PM

CSH SERVICES

15612422812

P. 1

LO8000029545

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000074575 3)))



H080000745753ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

2008 MAR 24 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

RECEIVED

08 MAR 24 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

D. Y. ADEKANMBI "LLC"

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$125.00 |

Electronic Filing Menu

Corporate Filing Menu

T. CLINE
Help

MAR 25 2008

EXAMINER

4-08000044595.3

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

D. Y. ADEKANMBI "LLC"

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

2640 BELMONT OAKS LN
TAMPA, FLORIDA 33610

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE,
REGISTERED AGENT SIGNATURE**

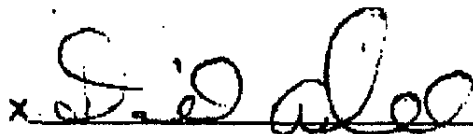
The name and the Florida street address of the registered agent is:

DANIEL ADEKANMBI
2640 BELMONT OAKS LN
TAMPA, FLORIDA 33610

2008 MAR 24 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Having been named as registered agent 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..



DANIEL ADEKANMBI / Registered Agent's signature

#080000745753

PAGE 2

D. Y. ADEKANMBI "LLC"

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

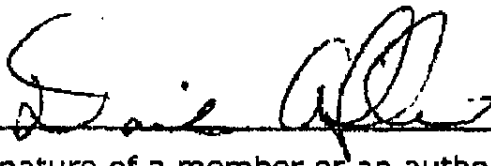
ARTICLE V MEMBERS (optional)

MANAGING MEMBER:

DANIEL ADEKANMBI

2640 BELMONT OAKS LN

TAMPA, FLORIDA 33610

x 

Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

DANIEL ADEKANMBI

FILED
2008 MAR 24 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA