## 108000040021

(Requestor's Name)
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PICK-UP WAIT MAIL
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(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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J. BRYAN

APR 2 2 2008

**EXAMINER** 

## **COVER LETTER**

TO:	Registration So Division of Cor			
SUBJE	ECT:	IREEP, L (Name of Limited L	LC .iability Company)	
The end	closed Articles of	Organization and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter to	o the following:	
		JEFFRE-	1 Young	
	<u> </u>		me of Person)	
		TREEP	LLC	
•		TREEP (Fir	m/Company)	
		3310 NW	53RD CIRCLE (Address) FL, 33496	08 APR 21
•		•	(Address)	PR 2
		BOCA RATON	, tc , 33496	- CO
-		(City/Sta	ate and Zip Code)	<b>3</b> 70 5
For furt	ther information o	concerning this matter, please cal	1.	<b>9</b>
	JEFFREY	~ <i>1</i>	(	707
	(Name	of Person)	(Area Code & Daytime Teleph	none Number)
Enclos	sed is a check fo	r the following amount:		
<b>≦</b> \$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	S160.00 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 Circ Tallahassee, FL 32301	cle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	08 APR 21
IREEP, LLC	7 A Sec.
(Must end with the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Buca Raton, FL 33496	Boc- Raton, FL B3494
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
JEFFREY Y	00NG
Name	
3310 NW 532	d Circle
Florida street add	ress (P.O. Box NOT acceptable)
Boca Raton, F	L <sub>FL</sub> 33496
City, State, an	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as in I further agree to comply with the provisions of all reformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Title:	•	nager or Managing Member is as follows:  Name and Address:
"MGR" = Manage	er	
"MGRM" = Mana		3
Mca.		JEIFFREY YOUNG
MGRM		
		Boca Rata FL 33496
		Baco Reton FL 33496
M GRM		KAREN TALBOT
	<del>_</del>	1771 RINGLING BLVD
		SUITE 1102 SARASOTA, FL
,		
(Use attachment i	f necessary)	
	• •	
LE V: Effective of	late, if other than t	the date of filing: (OPTION
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LE V: Effective of fective date is list days after the da	date, if other than the date must te of filing.)  SNATURE:  Signature of a mental form of the date in the date is a signature of a mental form.	ber of an authorized representative of a member.  section 608,408(3), Florida Statutes, the execution
LE V: Effective of fective date is list days after the da	date, if other than the date must te of filing.)  SNATURE:  Signature of a ment of this document co	ber of an authorized representative of a member.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)