L0800043022

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(21), 2000, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
_				
·				

Office Use Only

G. MCLEOD

APR 3 0 2008

EXAMINER



300126264353

04/29/08--01030--022 **125.00

08 APR 29 PH 4: 21

April 25, 2008

Eric A. Arrington, Esq. 1150 Hillsboro Mile, #616 Hillsboro Beach, FL 33062 (954) 547-7755

Florida Department of State Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Please accept this cover letter to articles of organization and concomitant check for payment. Refer to name address and daytime telephone number listed above in the address.

Should there be any questions or concerns please do not heasitate to call.

Sincerely.

Eric A. Arrington, Esq.

COVER LETTER

TO: Registration S Division of Co		•	•
SUBJECT: Eric A	. Arrington & Asso	ociates, LLC.	
, 50202011	(Name of Limi	ited Liability Company)	
The enclosed Articles o	f Organization and fee(s) are	e submitted for filing.	
Please return all corresp	ondence concerning this ma	atter to the following:	
Eric Arring	ton		
	v	(Name of Person)	
Eric A. Ar	rington & Associa	tes, LLC.	
		(Firm/Company)	
1150 Hills	boro Mile, Suite 6		
		(Address)	
Hillsboro I	Beach, Florida, 33	ity/State and Zip Code)	
	(CI	ny/state and Zip Code)	
For further information	concerning this matter, pleas	se call:	
Eric Arrington		at (954) 547-7755	
(Name of Person)		(Area Code & Daytime Telephone Number)	
Enclosed is a check for	r the following amount:		
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is en	tus &
	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 Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
Eric A. Arrington & Associates, LLC (Must end with the words "Limited Liabili			
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Com	pany	is:
Principal Office Address:	Mailing Address:		
1150 Hillsboro Mile, Suite 616 Hillsboro Beach, Florida, 33062	1150 Hillsboro Mile, Suite 616 Hillsboro Beach, Florida, 33062		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registations business entity with an active Florida registration.)	ered Agent. You must designate an individual or another.		SEC
The name and the Florida street address of the re	egistered agent are:	08 APR 29	ORE T
Yolanda Patino		29	1865 1865 1865 1865 1865 1865 1865 1865
Name		PM	300
8635 Mangrove Cay		<u></u>	OR TA
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	21	io ii
West Palm Beach,	_ _{FL} 33411		X
City, State, a	nd 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..

Registered Agent Signature (REQUIRED)

(CONTINUED) Page 1 of 2

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:
	MGRM	Eric Arrington 1150 Hillsboro Mile, Suite 616 Hillsboro Beach, Florida, 33062
	MGR	Volanda Patino 8635 Mangove Cay West Palm Beach, 71.33411
	(Use attachment if necessary)	
(If an	ICLE V: Effective date, if other than the date effective date is listed, the date must be s 90 days after the date of filing.)	nte of filing:
	REQUIRED SIGNATURE: Signature of a member of	or an authorized representative of a member.
	(In accordance with section of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)
	Eric A. Arringto	n

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)

Typed or printed name of signee