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D. BRUCE

MAY 1 4 2008

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: Seff Souza LLC	
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Deff Souza (Name of Person)	
(Name of Person)	
Jeff Souza LLC (Firm/Company)	
(Firm/Company)	,
1417 SW 41 Ave (Address)	SECIET
(Address)	
Fort louder dule F1 33317	2 7
For Laudardale F1 33317 (City/State and Zip Code)	S I
(City/State and Zip Code) For further information concerning this matter, please call:	1.35 L
For further information concerning this matter, please call:	יים יי
Teff Suza at (954) 274-9752 (Name of Person) (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy}	Status & y
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations 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:

Principal Office Address:	Mailing Address:
1417 SW 41 ST FORT Candridake F1 33317	1417 SW 41 ST FORT Lauder da 1e F1 33317
	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual of another A HELD ARE The registered agent are:
Jeffery	→ O> <u>→</u>
1417 5-W	
	1 /

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

Jefferex Souza 1417 Sav YI Ave Forr Lauderdale F1 33317
of filing: (OPTION. ecific and cannot be more than five business da
an authorized representative of a member.
508.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)
r printed name of signee