# 108000048571

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
( )		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
·	·	•
(Do	cument Number)	
(DC	cament Namber)	
Certified Copies	Copies Certificates of Status	
Special Instructions to	Filing Officer:	
	· ·····g -···	
i		

Office Use Only



000129022840

05/14/08--01013--020



M. Thomas MAY 1 5 2008

## **COVER LETTER**

TO: Registration Section Division of Corpora			
SUBJECT: KOONE	(Name of Limited L		
The enclosed Articles of Orga	nization and fee(s) are subn	nitted for filing.	
Please return all corresponder	ce concerning this matter to	the following:	
ROONEY	Duluy		
RODNE	$\Omega$	e of Person)  PA //	OB ALL
	(Firm	n/Company)	また 「
2915 PERC	E STREET	#10	
·	,	Address)	94 二
HOLLYWOO	(City/Sta	20	Š
7	(City/Sta	te and Zip Code)	
For further information conce	rning this matter, please call	:	
ROONEY (Name of Per	son) at (	(Area Code & Daytime Telep	
Enclosed is a check for the	following amount:		
\$125.00 Filing Fee \$1	ertificate of Status	S155.00 Filing Fee &  Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Reg Div P.C	illing Address gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	ircle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
ROONEY COOLS AND SPA LLC (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 Comp
Principal Office Address: Mailing Address:
2915 PIERCE STREET #10 2915 PIERCE STREET #10 HOLLYWOOD, FT 33020 HOLLYWOOD, FT 33020
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:
HOONEY DUTLY
2915 PIERCE STREET #10
Florida street address (P.O. Box NOT acceptable)

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..

Registers Age 's Signature (REQUIRED

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGR

ROON= TOUV

29 IS GERCE STREET #/O

HOLLYWOOD FT 33020

MACALE M DVOY

29 IS GERCE STREET #/O

HOLLYWOOD FT 33020

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing:

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

## **REQUIRED SIGNATURE:**

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 failed herein are true.)

KODNEY DUTUN

Typed 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)

