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DEPARTMENT OF STATE
DIVISION OF CURPORATION

B. KOHR

MAY 2 0 2008

**EXAMINER** 

## LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

· · · · · · · · · · · · · · · · · · ·	0
CORPORATION NAME(S) & DOCUM	Office Use Only
PENICHET LLC.	m Color
(Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy  Photocopy  Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal
Other  OTHER FILINGS  Annual Report	☐ Merger  REGISTRATION/QUALIFIC:ATION  ☐ Foreign
Fictitious Name	Limited Partnership Reinstatement Trademark Other

Examiner's Initials

CR2E031(7/97)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
The name of the Limited Liability Company is:
The name of the Limited Liability Company is:    PENICHET L L C.
(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 Company is:
The maning address and street address of the principal office of the Ellinted Elability Goldpary is.
Principal Office Address: Mailing Address:
TILO SW 148 TERR. SAME
PALMETTO BAY, FL
50158
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:
MILLIE D. PENICHET
Name
THAIR TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE TO
7110 S.W. 148 TERR.
Florida street address (P.O. Box NOT acceptable)
PALMETTO BA FL 3315.  City, State, and Zip
City, State, and 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's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

## 

**REQUIRED SIGNATURE:** 

to or 90 days after the date of filing.)

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.)

MILLIE D. PENICHET.

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)