

L080000 52074

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entry Name)

(Document Number)

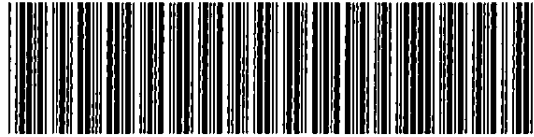
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

789 2826 671

Office Use Only

W08-22776



100128277461

05/05/08--01045--019 **130.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAY 27 PM 3:45

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Moira Co. 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:

Kyla Gutierrez

(Name of Person)

(Firm/Company)

1598 Birkshire Court

(Address)

Biloxi, MS 39532

(City/State and Zip Code)

For further information concerning this matter, please call:

Kyla Gutierrez at (228) 697-7880
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAY 27 PM 3:45

FILED

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2008

KYLA GUTIERREZ
1598 BIRKSHIRE COURT
BILOXI, MS 39532

SUBJECT: MOIRA CO. LLC
Ref. Number: W08000022776

We have received your document for MOIRA CO. LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on May 5, 2008. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 508A00028962

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAY 27 PM 3:45

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Moira Co. 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 Company is:

Principal Office Address:

707 E. Cervantes Street, Suite B 114
Pensacola, FL 32501

Mailing Address:

1598 Birkshire Court
Biloxi, MS 39532

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:

Kyla L. Gutierrez

Name

707 E. Cervantes Street, Suite B 114

Florida street address (P.O. Box **NOT** acceptable)

Pensacola, FL 32501

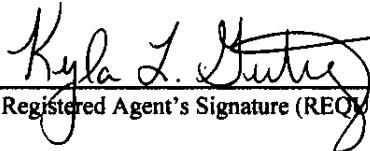
City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAY 27 PM 3:45

FILED

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

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

Name and Address:

Kyla L. Gutierrez

Kyla L. Gutierrez

1598 Birkshire Court

Biloxi, MS 39532

Jeffrey Anderson

Jeffrey Anderson

#1 Golfing Green Drive, Unit 202

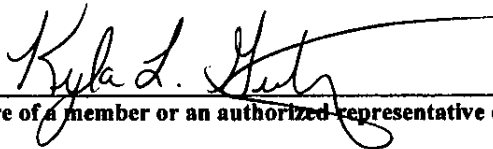
Ocean Springs, MS 39564

(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.)

SECRETARY OF STATE
MILWAUKEE, WISCONSIN
FILED
08 MAY 20 3:45 PM
FLORIDA

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 stated herein are true.)

Kyla L. Gutierrez

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)