L08000059584

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
A. LUNT
MAY 28 2008
EXAMINER

Office Use Only



700130105107

05/27/08--01031--026 **160.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Division of C	Section Corporations				
_{SUBJECT:} Bretz	ke Homes, LLC				
SUBJECT:		ted Liability Compa	ny)		
The enclosed Articles	of Organization and fee(s) are	submitted for filing	<u>.</u>		
	spondence concerning this mat	_			
David Bro	-	J			
David Div	SIZNG	(Name of Person)			
Bretzke I	Homes, LLC				
		(Firm/Company)			Zo z
376 Vale	ncia Circle				ZECRETI
		(Address)			Y 27
Oviedo, I	FL 32765				7 P
	(Ci	ty/State and Zip Code)		ST ST
For further informatio	n concerning this matter, pleas	e call:			
David Bretzke	•	at (407	509-193	3	
(Nan	ne of Person)		& Daytime Tele	ephone Number)	
Enclosed is a check	for the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	y	\$160.00 Filing Certificate of Certified Cop (additional copy	Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Bretzke Homes, LLC (Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
376 Valencia Circle	376 Valencia Circle
Oviedo, FL 32765	Oviedo, FL 32765
	egistered agent are: LAHASSEE, FLORIDA ess (P.O. Box NOT acceptable)
Oviedo, FL 32765	FL
liability company at the place designated in th registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of a formance of my duties, and I am familiar with and sered agent as provided for in Chapter 608, F.S

(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:

Oviedo, FL 32765
PS 8
AHE AI AHAS
- 10 T
E.O.
7 N
·

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.)

David Bretzke, Mgr

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)