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PICK-UP WAIT MAIL
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JUN - 2 2008

EXAMINER

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ECKETARY OF STATE

COVER LETTER

TO: Registration So Division of Cor			
SUBJECT: REICH	E ENTERPRISES	S LLC	
SUBJECT:		ed Liability Company)	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspo	ondence concerning this mat	ter to the following:	
LANCE W	REICHE		
		(Name of Person)	
REICHE E	NTERPRISES LL	_C	
		(Firm/Company)	
6185 DOR	TCH ROAD		
		(Address)	
CENTURY	FL 32535		
	(Cit	y/State and Zip Code)	
For further information of	oncerning this matter, please	e call:	
TOMMY HUNT	ER	at (601) 420-6100)
(Name o	of Person)	(Area Code & Daytime Telep	ohone 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)
	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 Ci	rcle

2000 HAY 30 PM 2: 36

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
REICHE ENTERPRISES LLC				
	the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
6185 DORTCH ROAD	6185 DORTCH ROAD			
CENTURY FL 32535	CENTURY FL 32535			
business entity with an active Florida registration.) The name and the Florida street address of LANCE W REIC	•			
6185 DORTCH	RD			
	reet address (P.O. Box NOT acceptable)			
CENTURY FL 3	<u> </u>			
City,	State, and Zip			
liability company at the place designal registered agent and agree to act in this c statutes relating to the proper and comp	and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S			
Pasimari Anni	s Signature (REQUIRED)			
Registered Agent's	s Signature (REQUIRED)			

(CONTINUED) Page 1 of 2 B HAY 30 PH 2: 3

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	LANCE W REICHE
	6185 DORTCH RD
	CENTURY FL 32535
	
· · · · · ·	
(Use attachment if necessary)	
IFV. Effective date if other than	the date of filing: (OPTION
	st be specific and cannot be more than five business d

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.)

LANCE W REICHE

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)

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