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· (Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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JUN 1 0 2008

EXAMINER



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SECRETARY OF STATE

COVER LETTER

TO:	Registration Division of C		
SUBJE	CT:	DOWNSTATE GROUP LI	.c
30242		(Name of Limi	ted Liability Company)
The end	closed Articles	of Organization and fee(s) are	submitted for filing.
Please	return all corres	spondence concerning this mat	tter to the following:
		HUGO A CINTRON	(Name of Person)
		DOWNSTATE GROUP	LLC (Firm/Company)
		10548 SPRING HIL	
			(Address)
		SPRING HILL, FL (Ci	34608 ty/State and Zip Code)
For furt	her information	n concerning this matter, pleas	e call:
ни	GO A CINTI (Nam	RON ne of Person)	at (<u>352</u>) <u>398-1312</u> (Area Code & Daytime Telephone Number)
Enclos	ed is a check t	for the following amount:	
□ \$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$\sum \\$155.00 \text{ Filing Fee & } \sum \\$160.00 \text{ Filing Fee,} \\ \text{Certified Copy (additional copy is enclosed)} \text{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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company	is:	
DOWNSTATE GROUP LLC		
(Must end with the words "Limited Lie	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
10548 SPRING HILL DRIVE SPRING HILL, FL 34608	10548 SPRING HILL DRIVE SPRING HILL, FL 34608	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Regulations entity with an active Florida registration.)		
The name and the Florida street address of the	e registered agent are:	NOT 80
HUGO A CINTRON	T	
Nan	ne	1 95.
10548 SPRING F	HILL DRIVE	9 7
Florida street a	address (P.O. Box NOT acceptable)	P 339 5
SPRING HILL	FI 34608	7 25 25 25 25 25 25 25 25 25 25 25 25 25

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)

City, State, and Zip

(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:

"MGR" = Man: "MGRM" = Ma	ager anaging Member	Name and Address:
MGRM		HUGO A CINTRON
		15255 DYLA WAY
		SPRING HILL, FL 34609
		BIRING RIDDS III 34009
		
		
LEV: Effective	e date, if other than the d	late of filing: <u>JUNE 04, 2008</u> . (OPTION
ective date is lidays after the o	e date, if other than the disted, the date must be alate of filing.)	late of filing: <u>JUNE_04, 2008</u> . (OPTION specific and cannot be more than five business d
LE V: Effective fective date is lidays after the o	e date, if other than the disted, the date must be alate of filing.)	late of filing: (OPTION specific and cannot be more than five business d
LE V: Effective fective date is lidays after the o	e date, if other than the disted, the date must be alate of filing.)	late of filing: (OPTION specific and cannot be more than five business d
LE V: Effective fective date is lidays after the o	e date, if other than the disted, the date must be date of filing.) IGNATURE:	late of filing: (OPTION specific and cannot be more than five business deformance of a member.
LE V: Effective fective date is lidays after the o	e date, if other than the disted, the date must be date of filing.) IGNATURE: Signature of a member (In accordance with sections)	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution and affirmation under the penalties of perjury
LE V: Effective ective date is l	e date, if other than the disted, the date must be date of filing.) IGNATURE: Signature of a member (In accordance with section of this document constitution that the facts stated here	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution under the penalties of perjury rein are true.) HUGO A CINTRON
EV: Effective ective date is li lays after the o	e date, if other than the disted, the date must be date of filing.) IGNATURE: Signature of a member (In accordance with section of this document constitution that the facts stated here	or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution and affirmation under the penalties of perjury rein are true.)

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)