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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| A. LUNT |
| <u> </u> |
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| FYARAUS |
| EXAMINER |
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Office Use Only



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SECRETARY OF STATE

COVER LETTER

| TO: Registration Section Division of Corporations | |
|---|-------|
| SUBJECT: L& DEMILY Enteronice 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: | |
| Timothy John Webb | |
| (Name of Person) | |
| (Firm/Company) | |
| 1413 S.W. 1st Ave. Pg = | **'' |
| (Address) | w.com |
| Deerfield Beach, FI 3344 2 > | |
| (City/State and Zip Códe) | C |
| For further information concerning this matter, please call: | |
| Timothy John Webb at 954 571 9963 (Name of Person) (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the following amount: | |
| | |
| L\$125.00 Filing Fee L\$130.00 Filing Fee & L\$155.00 Filing Fee & L\$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) |) |
| Mailing Address Registration Section Division of Corporations P.O. Boy 6327 Clifton Pullding | |

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| L & W Family Enterprise, 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 Address: | Mailing Address: | | | |
| 1413 S.W. 1st Ave. | 1413 S.W. 1st Ave. | | | |
| Deerfield Beach, FL 33441 | Deerfield Beach, FL 334 | 41 | | |
| (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the Timothy John Web | e registered agent are: | SEP -2 P I: HASSEE, FLORI | | |
| 1413 S.W. 1st Ave | • | 7 7 | | |
| Florida street a | address (P.O. Box NOT accept | ptable) | | |
| Deerfield Beach, F | L 33441 | | | |
| City, State | e, and Zip | | | |
| Having been named as registered agent and t liability company at the place designated it registered agent and agree to act in this capac statutes relating to the proper and complete | n this certificate, I hereby city. I further agree to co performance of my duties | accept the appointment as mply with the provisions of al | | |

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

| <u>Title:</u> | Name and Address: |
|-----------------------------------|---|
| "MGR" = Manager | |
| "MGRM" = Managing Member | |
| Imothy John Webb, MGR | 1413 S.W. 1st Ave. |
| | Deerfield Beach, FL 33441 |
| Chand Ass La Dass MODM | 4442 C.W. 4-4 Avr |
| Cheryl Ann LaRosa, MGRM | 1413 S.W. 1st Ave. Deerfield Beach, FL 33441 |
| | Desiried Deadi, FE 33441 |
| | |
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| | Sign 1 |
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| Use attachment if necessary) | |
| EV: Effective date, if other than | the date of filing: |
| | st be specific and cannot be more than five business d |
| | |
| REQUIRED SIGNATURE: | 1 |
| | n la |
| | ember or an authorized representative of a member. |
| Signature of me | ember or an authorized representative of a member. th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.) |
| Signature of me | th section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.) |

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)