108000084134

(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:					
1118/12/18/18/18/18/18/18/18/18/18/18/18/18/18/					
W08000040235					





100134923261

08/27/08--01010--025 **125.00

08 SEP -3 PHIZ: NI

D. BRUCE

SEP 0 4 2008

EXAMINER

COVER LETTER

	Registration Section Division of Corporations		
	CHRISTIAN PROPERTIES 110		
SUBJEC	(Name of Limited Liability Company)		
The enclo	osed Articles of Organization and fee(s) are submitted for filing.		
Please ret	rurn all correspondence concerning this matter to the following:		
	CHRISTIAN B. SMITH (Name of Person)		
_	(Name of Person)		

	(Firm/Company)		
	2408 SHALLEY DRIVE	∑	8
	2408 SHALLEY DRIVE (Address) TAUAHASSEE FLORIDA 32309 (City/State and Zip Code)	AH	SEP
	IAMAHASSEE FLORIDA 32309	ASS	<u> မ</u> ်
	(City/State and Zip Code)	Day of the second	
	er information concerning this matter, please call:	S IAIE LORID	PH 12: 01
CHI	(Name of Person) at (950) 251-9939 (Area Code & Daytime Telephone Number	er)	
Enclosed	is a check for the following amount:		
\$125.00	Filing Fee \$\Bigcup \\$130.00 Filing Fee & Bisson Filing Fee & Bisson Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified (additional copy is enclosed)	e of Stati Copy	us &
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle		

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 28, 2008

CHRISTIAN B. SMITH 2408 SHALLEY DRIVE TALLAHASSEE, FL 32309

SUBJECT: CHRISTIAN PROPERTIES, LLC

Ref. Number: W08000040235

08 SEP -3 PH IZ: NI
SEVAHNSSEE, FLORIDA

We have received your document for CHRISTIAN PROPERTIES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 708A00047914

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
Renta 1				
_				
(HRISTIAN N PROPE	RTIES LLC			
(Must end with the words "Limited Liability Co	Company, "L.L.C.," or "LLC.")			
	4 9,			
ARTICLE II - Address:				
The mailing address and street address of the princi	inal office of the Limited Liability Company is:			
The maning address and super address of the prince	par office of the Diffited Diagnity Company is.			
Principal Office Address:	lailing Address:			
Zimerpar Office readicess.	Tudiress.			
2408 SHAUEY DRIVE	2 ADB SHALLEY DRIVE			
TAIL DHASCEL GURION	TALLAHASCCE PROPERTY			
32306	32215			
	3030			
ARTICLE III - Registered Agent, Registered Off	fice & Degistered Agent's Signature.			
(The Limited Liability Company cannot serve as its own Registered				
business entity with an active Florida registration.)	TA.			
71				
The name and the Florida street address of the registered agent are:				
CHRISTIAN B.	Salar Salar			
Name				
240 g SHAWEY DRIVE SP				
	(P.O. Box NOT acceptable)			
	(1.0. Box HOT acceptable) 5.77 3			
JAUAHASSEE FL	32309			
City, State, and Z	lip			
Having been named as registered agent and to accep				
liability company at the place designated in this c				
registered agent and agree to act in this capacity. If	further agree to comply with the provisions of all			

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)

Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member mGR (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: _. (OPTIONAL) (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.) **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 perjuty) that the facts stated herein are true.) 11 Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

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

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