L08000098082

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(Requestor's Name)						
(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:						
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COVER LETTER

,TO:	Registration Division of C				
 SURT	ECT: T.A.S	.K.			
30 00	<u> </u>		ed Liability Compa	ny)	
The er	nclosed Articles	of Organization and fee(s) are	submitted for filing	; .	
Please	return all corres	pondence concerning this mat	ter to the following	:	
	Broderick	Adderley			
			(Name of Person)		· · · ·
			(Firm/Company)		
			(rim/Company)		
	P.O. Box	638			
			(Address)		
	Hallandal	e, FL 33008			
		(Cit	y/State and Zip Code)	
For fu	rther information	concerning this matter, please	e call:		
Broo	derick Add	erley	at (954	588-015	0
	(Nam	e of Person)	(Area Code & Daytime Telephone Number)		
Enclo	sed is a check f	or the following amount:			
□\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Copy (additional copy	by	\$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	Registration of Clifton Board Exe	nurier Address on Section of Corporations uilding cutive Center C	



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2008

BRODERICK ADDERLEY P.O. BOX 638 HALLANDALE, FL 33008

SUBJECT: T.A.S.K., LLC Ref. Number: W08000043014

We have received your document for T.A.S.K., LLC and your check(s) totaling \$160.00. 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.

The document number of the name conflict is J04099.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6047.

Carolyn Lewis Regulatory Specialist II

Letter Number: 108A00050429

· ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:				
(Must end with the words "Limited Liability	INTERNATIONA LL 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:			
Hallandale, FL 38000 HALLANDALE, FL. 33009	P.O. Box 638 Hallandale, FL 33008			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the results.	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another			
The name and the Florida street address of the re	gistered agent are:			
Broderick Adderley				
Name	acc (B.O. Box NOT accentable)			
708 NW 9th Court				
	ess (F.O. Box HOT acceptable)			
Hallandale, FL 33009	(10			
City, State, ar	d Zip			

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)

(CONTINUED) Page 1 of 2

FILED

. ARTICLE IV- Manager(s) or The name and address of each N	Managing Member(s): Manager or Managing Member is as follows:	2000 OCT 16	PM 4: 15
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETART TALLAHASSE	GI SIAIE E.FLORIDA
MGR	Broderick Adderley		
	708 NW 9th Court		
	Hallandale, FL 33009	 	
MGR	Machele Harris		
	P.O. Box 170440		
	Miami, FL 33017		
			
	•		
(Use attachment if necessary)			
FICLE V: Effective date, if other the n effective date is listed, the date may 90 days after the date of filing.)	an the date of filing: nust be specific and cannot be more than five	(OPTIONAL) business days p	rior
REQUIRED SIGNATURE:			
Signature of a n	leud Oddeve nember or an authorized representative of a memby	7.	
of this documen	vith section 608.408(3), Florida Statutes, the execution t constitutes an affirmation under the penalties of perjustated herein are true.)	nry	
Broderick	Adderley		

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)

Typed or printed name of signee