Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORPORATE OUTFITS

Account Number : 071001002335

Phone : (305)599-0839

Fax Number

: (305)716-0346

ORIDA/FOREIGN LIMITED LIABILITY CO.

TATATON 3, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

EXAMINER

2000 OCT 22 AM 7: 44

PRODUTARY DE STATE

ARTICLES OF ORGANIZATION FO	R FLORIDA LIMITED LIABILITY COMPANYAHASSEE, FLOR
ARTICLE I - Name: The name of the Limited Liability	Company is:
TATATON 3, LLC	
(Must end with the words "Limited Liability C	ompany, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street add	ress of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5108 SW 155 AVE	SAME
MIRAMAR, FL 33027	
(The Limited Liability Company cannot serve husiness entity with an netive Florida registra. The name and the Florida street add	dress of the registered agent are:
ORLANDO LO	
	Name
5108 SW 155 A	VE
	THE CO. D. MATERIAL STREET
	orida street address (P.O. Box NOT acceptable)
	PL 33027 City, State, and Zip

Hav 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..

FILED

ARTICLE IV- Manager	r(s) or Managing Member(s):	2000 OCT 22 AM 1: 44
	s of each Manager or Managing Member is as f	
Title: "MOR" = Manager "MGRM" = Managin	Name and Address:	follows: SECRETARY UP STATE TALLAHASSEE, FLORIDA
MGRM	ORLANDO LOZANO	
	5108 SW 155 AVE.	
	MIRAMAR, FL 33027	
	<u> </u>	
(Use attachment if ne	cessary)	
(- 1		
TCLE V: Effective date, if n effective date is listed or r 90 days after the date	other than the date of filing: i, the date must be specific and cannot be n of filing.)	(OPTIONAL) nore than five business days
REQUIRED SIGNAT	TURE:	
- 	9/9/aullul	
me r (In a of ປ	nature of a member or an authorized representation of a member occurred and the section 608.408(3). Florida Statutes, the one occurred the penaltic at the facts stated herein are true.)	execution
ORI	LANDO LOZANO	
<u></u>	Typed or printed name of signee	