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PICK-UP WAIT MAIL
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(Document Number)
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M. THOMAS

NOV 2 5 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co		
_{SUBJECT:} Toney	Properties Limited Liability Company	
	(Name of Limited Liability Company)	
The enclosed Articles of	of Organization and fee(s) are submitted for filing.	
Please return all corresp	pondence concerning this matter to the following:	
Robert C.		
	(Name of Person)	
Toney Pro	operties Limited Liability Company	
	(Firm/Company)	
14060 NW	V 19 Ave	
<u> </u>	(Address)	
Opa Locka	a, Fl 33054	
	(City/State and Zip Code)	
For further information	concerning this matter, please call:	SECRE FALLAH
Jane Toney	at (305) 685-2453	
(Name	e of Person) (Area Code & Daytime Telephone Nu	mber)
Enclosed is a check for	For the following amount:	STATE ORIDA
\$125.00 Filing Fee	Certificate of Status Certified Copy Certified (additional copy is enclosed) Certified Copy is enclosed)	Filing Fee, cate of Status & ed Copy nal copy is enclosed)
	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

November 19, 2008

ROBERT C. TONEY 14060 NW 19 AVE. OPA LOCKA, FL 33054

SUBJECT: TONEY PROPERTIES LIMITED LIABILITY COMPANY

Ref. Number: W08000052508

We have received your document for TONEY PROPERTIES LIMITED LIABILITY COMPANY 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. The One or more words may be added to make the name distinguishable from the properties 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) 245-6097.

Marsha Thomas Regulatory Specialist II 13 NOV 18 AM 7:55

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Letter Number: 908A00057758

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TONEYROB PROPERTYES LLC

Toney Properties Limited Liability Company

(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 of the Limited Liability Company is:

Principal Office Address:	Mailing Address:	
14060 NW 19 Ave	14060 NW 19 Ave	
Opa Locka, FI 33054	Opa Locka, Fl 33054	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)		81 AOM EG
The name and the Florida street address of the	registered agent are: 무구	P
Jane Toney	ORIC	7: 55
Name	¥'''	сп
14060 NW 19 Ave		
Florida street ad	dress (P.O. Box <u>NOT</u> acceptable)	
Opa Locka, Fl 3305	4 _{FL}	
City, State,	and 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



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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
	Pub. 10 Taxas
MGR	Robert C. Toney
	14060 NW 19 Ave
	Opa Locka, Fl 33054
MGRM	Jane Toney
	14060 NW 19 Ave
	Opa Locka, FI 33054
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(Use attachment if necessary)	
LE V: Effective date, if other than the	ne date of filing: 11/18/08 (OPTION
ffective date is listed, the date must	be specific and cannot be more than five business of

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 perjury that the facts stated herein are true.)

Robert C. Toney

Typed or printed name of signee

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)