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T. HAMPTON

DEC - 4 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Elike Custom Mobile Detailing UC (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:
Wendell R. Evans (Name of Person)
Men of The Family (Firm/Company)
1020 Reofing Pines Blad (Address)
(Address) M. Juay FL 32343 (City/State and Zip Code)
(City/State and Zip Code) For further information concerning this matter, please call:
Wendell 2 Evans at (850) 591-3714 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:
(Must end with the words "Limited Liab	stom Mohile Detailing L.L. C bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the I	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
18 49 Nicklaus Dr. Apt 1 7011 FC 32309	Midway FC 32343
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	
The name and the Florida street address of the	
Thaddres J.	Colson
Namo	e
1849 Nicklan	S Dr. Apt Z ddress (P.O. Box NOT acceptable)
Florida street ac	ddress (P.O. Box <u>NOT</u> acceptable)
Talluhissee City, State,	FL 323 6 2
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and its tered agent as provided for in Chapter 608, F.S
Registered Agent's Signa	SECRETARY DIVISION OF CO 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:

		See Attached
		·
·		
(Use attachment if ned	cessary)	
	the date must b	e date of filing: (OPTIONAL) se specific and cannot be more than five business days p
LE V: Effective date, Tective date is listed, t	if other than the	

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.)

Windell IL. Evans

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)

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Men Of The Family L.L.C.

Article IV- Manager(s) or Managing Member(s)

Title: MGR	Name Tim Bryant	Address 1849 Nicklaus Dr Apt #1 Tallahassee, FL 32301
MGR	Obidiah Rhodes	1435 Kingford Ave Tallahassee, FL 32310
MGR	Crosby Whitaker	2154 Burnt Pines Lane Tallahassee, FL 32317
MGR	Shelly Baity	5560 Dayflower Circle Tallahassee, FL 32311
MGR	Bruce Adams	3431 Chateau Dr San Antonio, Texas 78219
MGR	Ramon Evans	1020 Rustling Pines Blvd Midway, FL 32343
MGR	Thaddius Colson	1849 Nicklaus Dr. Apt #1 Tallahassee, FL 32301
MGR.	Jarees Baity	5560 Dayflower circle Tallahassee, FL. 32311