L09000020237

(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:					
L. SELLERS					
MAR - 2 2009					
EXAMINER					

Office Use Only



900144471499

03/02/09--01006--007 **130.00

09 HAR -2 AM 10: 40

DISTANTINE STATE OF ACTION

DISTANTINE STATE

DIS

09 MAR -2 AM ID: 44
SECRETARY OF STATE

COVER LETTER

TO;	Registration Section Division of Corporations
SUBJI	(Name of Limited Liability Company)
The en	osed Articles of Organization and fee(s) are submitted for filing.
Please	eturn all correspondence concerning this matter to the following:
	Dianne McDaniel (Name of Person)
	ONAC FINANCE, LLC (Firm/Company)
•	
-	6381 Persacola Blvd
	Persacola FL 32505 (City/State and Zip Code)
-	(City/State and Zip Code)
For furt	er information concerning this matter, please call:
W.	Hamp Ge 1 FFIN at (850) 9/2-8007 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclose	is a check for the following amount:
l \$125.0	Filing Fee \$\sum_{\text{S130.00 Filing Fee & }} \sum_{\text{S155.00 Filing Fee & }} \sum_{\text{S160.00 Filing Fee, }} \text{Certificate of Status & Certified Copy (additional copy is enclosed)} \text{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:				
ONAC FINANCE (Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")		_	
ARTICLE II - Address: The mailing address and street address of the pr		iability ·	Comp	oany is:
Principal Office Address:	Mailing Address:			
CO301 Pensacola Blvd Pensacola, FL 32505	1381 Pensaco, Pensacola, FA	la 6		5
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)				
The name and the Florida street address of the r	egistered agent are:			
<u>Diahne</u>	Mc Deniel			
Name 6381 Perusa	narla alla			
Florida street add	ress (P.O. Box NOT acceptable)			
Pensaas la City, State, a	FL 32505	-		
City, State, a	nd Zip			
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete peacety the obligations of my position as regis	his certificate, I hereby accept to b. I further agree to comply with rformance of my duties, and I d	the appoi h the pro m famili	intmei ovisioi ar wii	nt as ns of all th and
Registered Agent's Signati	ure (REQUIRED)	SEURETARY O	09 MAR -2 AI	
(CONTIN	U ED)	FLOR	AM IO: 4	O

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: "MGR" = Manager "MGRM" = Managing Member MCRM Diane Me Makel 10381 Fersacula Bird Fersacula, FL 32505 (Use attachment if necessary)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608 408(3), Florida Statutes, the execution

(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.)

Drange Mc Danie

Typed or printed name of signe

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

Filing Fees:

\$ 5.00 Certificate of Status (Optional)

MAR -2 AM 10: 44
CRETARY OF STATE
AHASSEE ET DRING