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FILED

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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN APR - 6 2009

EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJ	FCT. The La	aTello Group LLC			
SUBJ	ECI:		ed Liability Compa	ny)	
The en	nclosed Articles o	of Organization and fee(s) are	submitted for filing	, ,	
Please	return all corresp	pondence concerning this mat	ter to the following	:	
	Thomas E	. LaMontagne			
			(Name of Person)		
	The LaTe	llo Group LLC			SE S
			(Firm/Company)		PR T
	38 South	Blue Angel Pkwy #	4 210		お至 人 で
			(Address)	, ,,,,	mon 3
	Pensacola	a, Florida 32506			AMII: 51
		(Cit	y/State and Zip Code)	वाम ज
For fu	rther information	concerning this matter, please	e call:		
Tho	mas E. Lal	Montagne	at (850	232-048	9
	(Name	e of Person)	(Area Code	& Daytime Tel	ephone Number)
_		or the following amount:	□\$155.00 Filing	_	\$160.00 Filing Fee,
		Certificate of Status	Certified Cop	•	Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Olivision of Clifton Bo 2661 Exe	of Corporation	s

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	ty Company, "L.L.C.," or "LLC.")		
The LaTello Group LLC (Must end with the words "Limited Liabili	N Company "LLC" or "LC"		
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
The LaTello Group 38 S. Blue Angel Pkwy # 210	The LaTello Group 38 S. Blue Angel Pkwy # 210		
Pensacola, Florida 32506	Pensacola, Florida 32506		
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 registration.	ered Agent. You must designate an individual or another Effective Date 04 01 09		
Thomas E. LaMontag	gne		
Name			
38 S Blue Angel Pkw	y # 210		
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)		
Pensacola, Florida 32	25,06		
City, State, an	nd Zip		
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as . I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S		

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

F#7" 4 B	المارين
Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	س آيلز
MGR	Thomas E. LaMontagne
	38 S. Blue Angel Pkwy # 210
	Pensacola, Florida 32506
MGR	Eva E. Rainey
	38 S. Blue Angel Pkwy # 210
	Pensacola, Florida 32506
	
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(Use attachment if necessary)	
LE.V. Effective date if other than the	date of filing: / *//K// ~/BOY (OPTIO
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	date of filing: YPRIL 2009. (OPTIO
fective date is listed, the date must be days after the date of filing.)	
fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	e specific and cannot be more than five business
fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	
fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with sec	r or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury
fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document consti	r or an authorized representative of a member. etion 608.408(3), Florida Statutes, the execution tuttes an affirmation under the penalties of perjury erein are true.)

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)