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(Re	equestor's Name)		
(Address)			
(Ad	ddress)		
(C	ity/State/Zip/Phone	> #)	
PICK-UP	MAIT	MAIL	
(Business Entrty Name)			
(Document Number)			
Certified Copies	Certificates	of Status	
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SECRETARY OF STATE

J. BRYAN
MAY 2 7 2009
EXAMINER



Creating Your Financial Future®

2248 Meridian Boulevard, Suite H Minden, Nevada 89423

775-284-7165 - Darla Direct 800-600-1760 - Toll Free 775-824-0105 – Fax dshields@corporatedirect.com

May 21, 2009

Secretary of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Dhillon Property Group Florida, LLC

Dear Clerk:

Enclosed please find the Articles of Organization for the above referenced entity along with our check in the amount of \$130.00 for the filing fees. Please return this filing in the envelope that has been provided.

Thank you for your assistance with this filing. Should you have any questions, please don't hesitate to contact me at the number above.

Sincerely,

Darla Shields
Account Executive

are Thurs

:ds Encl.

TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Dhillon Property Group Florida, LLC	ility Company)
(Name of Limited Liabi	ility Company)
The enclosed Articles of Organization and fee(s) are submittee	ed for filing.
Please return all correspondence con	79.0
Darla Si	hields
(Name of	f Person)
Corporate D	Direct, Inc.
(Firm/Co	ompany)
2248 Meridian B	elvd., Suite H
(Add	lress)
Minden, N	NV 89423
(City/State ar	
For further information concerning this matter, please call:	
at (at	775) 284-7165
(Name of Person)	(Area Code & Daytime Telephone Number)

STREET ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	55,50
The name of the Limited Liability Compar	
Dhillon Property Group Florida, LLC	FF 87 1. 02
ARTICLE II - Address:	9m
The maining address and street address of t	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
20 Eagle Lake Pl., #13	1037 Greystone Lane
San Ramon, CA 94582	Sarasota, FL 34232
ARTICLE III - Registered Agent, Regis	tered Office, & Registered Agent's Signature:
The name and the Florida street address of	
Gerri	Detweiler
Name	
1037 Gre	eystone Lane
Florida street addres	ss (P.O. Box <u>NOT</u> acceptable)
Sarasota	FLORIDA 34232
City, S	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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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	Name and Address:	OS MAY 2F
Manager	Alexandra Dhillon 20 Eagle Lake Pl., #13 San Ramon, FL 94582	ASSIE FLOS
(Use attachment if necessary)		
NOTE: An additional article must be	added if an effective date is requested	ì.
Signature of a member or an au (In accordance with section 608.4	uthorized representative of a member. 408(3), Florida Statutes, the execution ffirmation under the penalties of perjury	

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Darla Shields, Organizer
Typed or printed name of signee