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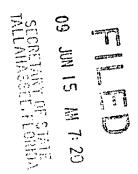
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(Address)
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S. HAWKES
JUN 1 6 2009
EXAMINER

COVER LETTER

TO:

Registration Section

Division of C	orporations		
SUBJECT:	Aleth	eia Associates, LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles	of Organization and fee(s) are	e submitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	M	artin McMullian	
		Name of Person	
	Alethe	eia Associates, LLC	
		Firm/Company	
	351	5 Landmark Trail	
		Address	
	Palm	Harbor, FL 34684	
	. /	ity/State and Zip Code	
	✓ mcmu	lian781@yahoo.com	
	E-mail address; (to be used	for future annual report notification)	
For further information	concerning this matter, pleas	se call:	
Martin McMullian		at (727) 2:	30=1649
Name of Person		at (727) 25 Area Code & Daytime Tele	phone Number
Enclosed is a check f	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)]\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section	Street/Courier Address Registration Section	
	Division of Corporations	Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center C Tallahassee, FL 32301	lircle
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	the graph of the second	Street to the second of the second	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	:
Aletheia Assoc	
(Must end with the words "Limited Liab	inty Company," "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3515 Landmark Trial	3515 Landmark Trail
Palm Harbor, FL 34684	Palm Harbor, FL 34684
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the Martin Mo Name	stered Agent. You must designate an individual or another registered agent are:
3515 Landr	mark Trail
Florida street address (P.O	Box NOT acceptable)
Palm Harbor 34684	FI.
City, State, a	and Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

(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:

"MGR" = Man "MGRM" = M	ager anaging Member	Name and Address:	
MGRM		Jane H. McMullian	
		3515 Landmark Trail	
		Palm Harbor, FL 34684	تتناش
malen			¢
(1/C4511)		Martin McMullian 200 2	
		3515 Landmark Trail	
		Palm Harbor, FL 34684	-
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		· · · · · · · · · · · · · · · · · · ·	
(Use attachmen	t if necessary)		
	• /	- CCL - (OPTIONAL	
CLE V: Effective	e date, if other than the date	e of filing: (OPTIONAL	
CLE V: Effective date is I	e date, if other than the date isted, the date must be spe	e of filing: (OPTIONAL ecific and cannot be more than five business days	
CLE V: Effective	e date, if other than the date isted, the date must be spe		
CLE V: Effective effective date is left days after the	e date, if other than the date isted, the date must be speaked of filing.)		
CLE V: Effective date is I	e date, if other than the date isted, the date must be speaked of filing.)		
CLE V: Effective effective date is left days after the	e date, if other than the date isted, the date must be speciate of filing.) IGNATURE:		
CLE V: Effective effective date is left days after the	e date, if other than the date isted, the date must be speciate of filing.) IGNATURE: Signature of a member or (In accordance with section	an authorized representative of a member. 608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury	
CLE V: Effective effective date is left days after the	e date, if other than the date isted, the date must be speciate of filing.) IGNATURE: Signature of a member or (In accordance with section of this document constitute that the facts stated herein a	an authorized representative of a member. 608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury are true.)	
CLE V: Effective effective date is left days after the	e date, if other than the date isted, the date must be speciate of filing.) IGNATURE: Signature of a member or (In accordance with section of this document constitute that the facts stated herein a Minimum of the section of the section of this document constitute that the facts stated herein a Minimum of the section of the section of this document constitute that the facts stated herein a Minimum of the section of the section of this document constitute that the facts stated herein a Minimum of the section of	an authorized representative of a member. 608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Page 2 of 2