# 109000076495

(Re	equestor's Name)	···
(Address)		
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	<i>·</i> → #)
PICK-UP	MAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
·		

Office Use Only



800158870398

Effective Date 07/23/09

07/28/09--01025--005 \*\*130.00

O9 JUL 28 PH 4: 30
SEGRETARY OF STATE
TALL AHASSEF, FI OBIO

W09-34483

J. BRYAN

AUG 1 0 2009

EXAMINED



## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 29, 2009

DEREK L. DAVIS LONDALE HOLDINGS GROUP, INC. 110 E BROWARD SUTIE 1710 FT LAUDERDALE, FL 33301

SUBJECT: LONDALE INTERNATIONAL, LLC

Ref. Number: W09000034483

Upon receipt of your letter and/or check(s) totaling \$130.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

Operating Agreements are not filed with our office. Keep for your records.,

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 409A00025977

Joey Bryan Regulatory Specialist II FILED

O9 JUL 28 PH 4: 30

SECRETARY OF STATE
FALLAHASSEE, FLORIDA

#### **COVER LETTER**

Divis	stration Section Ion of Corporations	
SUBJECT:	LONDALE INTERN	UATIONAL, LLC. 300 8
SUBJECT: _	Name of Limited Liabi	UNTIONAL, LLC. 200 30 11 11 11 11 11 11 11 11 11 11 11 11 11
The enclosed	Articles of Organization and fee(s) are submitte	ed for filing.
Please return a	all correspondence concerning this matter to the	e following:
	DEREK L. DAUTS	OR ID
	LONDALE HOLDEN	185 GROUP, INC
	110 E. BROWARD	
	Add	iress
	FT LAUDERDALE City/State a	FZ 33301
	City/State a delay; / Com  Beneal address: (to be used for future	nd Zip Code
	Exeman address: (to be used for future	s annual report notification)
For further info	ormation concerning this matter, please call:	
DEREK	Name of Person at (	959 319-7177 Area Code & Daytime Telephone Number
	check for the following amount:	
□\$125.00 Fili	ng Fee \$\int_{\\$130.00}\$ Filing Fee & \$\square\$\$15 Certificate of Status Certificate of	\$160.00 Filing Fee, certified Copy ditional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED L	IABILITY COMPANY TI
ARTICLE I - Name: The name of the Limited Liability Company is:	LZ8 P
Must end with the words "Limited Liability Company," "L.L.C.," or "LI	(2C. Fig. 7. 3)
ARTICLE II - Address: The mailing address and street address of the principal office of the Lin	T
Principal Office Address: Mailing Address:	
10 E. BROWARD Suite 1710 110 E. BROV ET LAUDERDALE, FL. 33301 FTLAUDERDALE	vario Surte 1710 FL 33301
ARTICLE III - Registered Agent, Registered Office, & Registered (The Limited Liability Company cannot serve as its own Registered Agent. You must designat business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	Encoure Date of 1 60 10
DEREK LONDAGE DAUTS  Name  3527 N.W. 25 street	_
Florida street address (P.O. Box NOT acceptable)  FL LAUD SRURLE FL 333//  City, State, and Zip	-
Having been named as registered agent and to accept service of process liability company at the place designated in this certificate, I hereby a registered agent and agree to act in this capacity. I further agree to comstatutes relating to the proper and complete performance of my duties, accept the obligations of my position as registered agent as provided.	for the above stated limited accept the appointment as ply with the provisions of all and I am familiar with and

(CONTINUED)

Registered gent's Signature (REQUIRED)

#### Page 1 of 2

ARTICLE IV- Manager(s) or Man	
The name and address of each Manag	ger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MERM	DEREK LONDALE DAVIS  3527 N.W. 25STREET
MERM	ANTHONY A. BROWN
MERM .	MIAMI, FL 33169 GLEN MATTHEWS
	275 PENNA AVE #3207 PUTCA, PA 19130
MERM	CHARLES SNEED 3425 PINEWALK DR. NORTH MARGATE, FL 33063
(Use attachment if necessary)	NOICH MINISTER TE JULIUS
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:	e date of filing: 22 July 2009. (OPTIONAL)  ne specific and cannot be more than five business days prior
Signature of a member	erfor an authorized representative of a member.
	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury exein are true.)
DEREK Ty Filing Fees:	yped or printed name of signee

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

### CONTINUATION ARTICLE IV- Manager(s) or Managing Member(s):

Title:	Name and Address
MERM	TERRELL V. CARSON
	1959 LETLA PLACE
	LAKE LAND, FL 33805

FILED

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SECRETARY OF STATE
SECRETARY OF FLORIDA