# 10900080874

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08/20/09--01027--003 \*\*125.00



D. BRUCE

AUG 21 2009

**EXAMINER** 

# **COVER LETTER**

CLIPTECT	Angel's	Vacation Rentals, LLC	
SUBJECT:		ted Liability Company	··· <del>·</del>
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Leah	J. Puckett-Skwierc	
		Name of Person	
	Angel's \	Vacation Rentals, LLC	
		Firm/Company	DEC 09
	3327 1	River Estates Drive	09 AUG 20 SECRETARY LLAHASS
	3327 1	Address	- <del>SSR</del> 20
		<b>T</b> :	EE 07
		nauma, FL 33598 ity/State and Zip Code	- F.S
		gel1942@aol.com	AFE RBD
	E-mail address: (to be used	for future annual report notification)	
For further information	concerning this matter, pleas	se call:	
	Puckett-Skwierc	at (813)634-641	
Name	of Person	Area Code & Daytime Telephone Nun	noer
Enclosed is a check f	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certified (additional copy is enclosed) Certified Copy is enclosed)	O Filing Fee, cate of Status & ed Copy is enclosed)
	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations	
	P.O. Box 6327 Tallahassee FI 32314	Clifton Building 2661 Executive Center Circle	

2661 Executive Center Tailahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compar	ny is:
Angel's Vacati	ion Rentals, LLC d Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address:	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3327 River Estates Drive Wimauma, FL 33598	3327 River Estates Drive Wimauma, FL 33598
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Leah J. F.  3327 Riv	Puckett-Skwierc Name Per Estates Drive
Wimauma, FL 33	s (P.O. Box NOT acceptable)
Having been named as registered agent at liability company at the place designate registered agent and agree to act in this constatutes relating to the proper and complete accept the obligations of my position at the proper and complete accept the obligations of my position and the proper and complete accept the obligations of my position and the proper and the pr	and to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as appacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S  Signature (REQUIRED)

(CONTINUED)

EFFECTIVE DATE  $\frac{9/1/09}{}$ 

### 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" = Manager "MGRM" = Managing Men	Name and Address:
MGRM	Leah J. Puckett-Skwierc  3327 River Estates Drive  Wimauma, FL 33598
(Use attachment if necessar	er than the date of filing: September 1, 2009 . (OPTIONAL)
ICLE V: Effective date, if oth a effective date is listed, the day 90 days after the date of filing REQUIRED SIGNATUR	er than the date of filing: September 1, 2009 (OPTIONAL) ate must be specific and cannot be more than five business days prior g.)  E:  **LUCLUT**  **
ICLE V: Effective date, if oth a effective date is listed, the da 90 days after the date of filing REQUIRED SIGNATUR Signature (In accordance of this do	er than the date of filing: September 1, 2009 (OPTIONAL) ate must be specific and cannot be more than five business days prior g.)  E:  A Company of a member or an authorized representative of a member.  Cance with section 608.408(3), Florida Statutes, the execution cument constitutes an affirmation under the penalties of perjury
ICLE V: Effective date, if oth a effective date is listed, the da 90 days after the date of filing REQUIRED SIGNATUR Signature (In accordance of this do	er than the date of filing: September 1, 2009 (OPTIONAL)  ate must be specific and cannot be more than five business days prior  g.)  E:  Of a member or an authorized representative of a member.  ance with section 608.408(3), Florida Statutes, the execution cument constitutes an affirmation under the penalties of perjury