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EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

5860 LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Ann Roach Name of Person 5860 LLC Firm/Company 7355 NW 52 Street Address Lauderhill, FI 33319 City/State and Zip Code Lloydr07@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ann Roach Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: ■\$125.00 Filing Fee **\$130.00** Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copyril (additional copy is enclosed) (additional copy is enclosed) **Mailing Address** Street/Courier Address Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Com	pany is:	
	360 LLC ited Liability Company," "L.L.C.," or "LLC	C.")
(Must end with the words Elmi	nea manney company, E.E.C., or EE	o. <i>,</i>
ARTICLE II - Address: The mailing address and street address of	of the principal office of the Lim	ited Liability Company is:
Principal Office Address:	Mailing Address:	
7355 NW 52 Street Lauderhill, Fl 33319	7355 NW 52 Street L:auderhill, Fl 33319	Ann Roach
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate	Agent's Signature: an individual or another
	Ann Roach	•
	Name	
735	5 NW 52 Street	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	
Lauderhill, FI 3	33319 _{FL}	
City	y, State, and Zip	
Having been named as registered agent liability company at the place design registered agent and agree to act in this statutes relating to the proper and com accept the obligations of my position Registered Agen	ated in this certificate, I hereby ac capacity. I further agree to comp nplete performance of my duties, a	ccept the appointment as oly with the provisions of all and I am familiar with and

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Mem	Name and Address:	
president	Ann Roach 7355 NW 52 Street Lauderhill, FL33319	
<u> </u>		
(Use attachment if necessary	Av E	
to or 90 days after the date of filing.	must be specific and cannot be more than five business days	prior
REQUIRED SIGNATURE Signature of	a member or an authorized representative of a member.	Land State of State o
of this docu	the with section 608.408(3), Florida Statutes, the execution ment constitutes an affirmation under the penalties of perjury stated herein are true.)	
Filing Fees:	Typed 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)