

L09000082808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

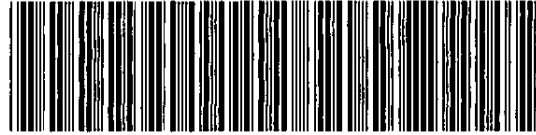
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

AUG 27 2009

EXAMINER

• **PAT GUERNSEY, CPA**

PAT GUERNSEY ACCOUNTING SERVICES, INC.
Member American Society of Accountants

P. O. BOX 195549
WINTER SPRINGS, FL 32719-5549
PHONE (407) 365-2936
FAX (407) 365-1669

AUGUST 21, 2009

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

Overnight Delivery:
409 E. GAINES STREET
TALLAHASSEE, FL 32399

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Madam/Sir:

Enclosed for filing are **two executed copies** of the Articles of Organization for:
acceptance of appointment for:

LOU'S GOLD MINE 704, LLC

Please file document and return a filed copy of the Articles of Organization to the address above.

A check for **\$130.00** is enclosed; \$125 for registration and \$5 for a certificate of status.



PAT GUERNSEY
Certified Public Accountant

ARTICLES OF ORGANIZATION
OF
LOU'S GOLD MINE 704, LLC.

I, the undersigned, being the Member and Organizer of the Limited Liability Company hereby being formed under Chapter 608 of the Florida Statutes, does hereby adopt the following Articles of Organization for the Limited Liability Company under the laws of the State of Florida.

ARTICLE I: NAME

The name of this Limited Liability Company shall be:

LOU'S GOLD MINE 704, LLC

ARTICLE II: ADDRESS

The street address and mailing address of the principal office of the Limited Liability Company in Florida is:

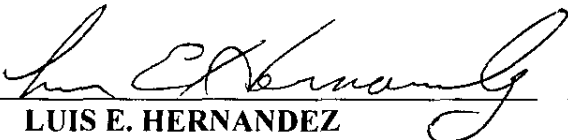
**1495 SEMINOLA BLVD SUITE 1019
CASSELBERRY, FL 32707-3647**

ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE, AND
REGISTERED AGENT SIGNATURE

The name and street address of the registered agent are:

**LUIS E. HERNANDEZ
1495 SEMINOLA BLVD SUITE 1019
CASSELBERRY, FL 32707-3647**

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, F. S.


LUIS E. HERNANDEZ
8/24/09
Date

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TALLAHASSEE, FLORIDA

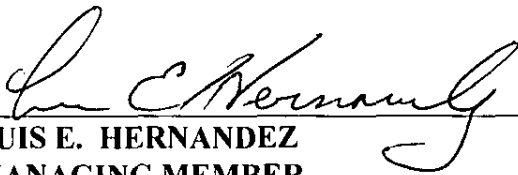
ARTICLE IV: MANAGER(S) OR MANAGING MEMBER(S)

The name and address of the sole Member and Managing Member are:

**LUIS E. HERNANDEZ, MGRM
1495 SEMINOLA BLVD SUITE 1019
CASSELBERRY, FL 32707-3647**

ARTICLE V: Effective date of the organization shall be the date of filing with the State of Florida. In accordance with 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

8/24/09
Date


**LUIS E. HERNANDEZ
MANAGING MEMBER**

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Page 2 of 2

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