1090000 95801

/Requis	stor's Nama	
(Reque	estor's Name)	
(Addre	ss)	
(Addre	ss)	
(City/S	tate/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Nan	ne)
(Docur	nent Number)	
Certified Copies	Certificates	of Status

Special Instructions to Filing Officer:

A. LUNT

OCT - 5 2009

EXAMINER

Office Use Only



800161107048

10/06/09--01001--010 **125.00



O9 OCT -5 PM 4: 02



COVER LETTER

TO: Registration Se Division of Cor			
subject: <u>Вга</u>	d Builder Name of Limit	ed Liability Company	- FEE 09 -
	Organization and fee(s) are	_	CT-5 PI
- 1/	endence concerning this mat		E.FLORIO
_Brack	Builder	S LLC Firm/Company	<i>ν</i>
2128	Faulk Dr	Address	
Tallahass	ee F1 3:	Z ZOS ty/State and Zip Code	
<u> </u>	E-mail address: (to be used	for future annual report notification)	
For further information co	oncerning this matter, pleas	e call:	
Breed Che	ezem. f Person	at (<u>#50</u>) <u>294</u> – Area Code & Daytime Teleph	25/Z none Number
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155,00 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
Brad Builder's LLC (Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
2128 Fault Dr. Same Tallahossee F1, 32303
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Brad Cherem Name
Name
2128 Fauld Dr. Florida street address (P.O. Box NOT acceptable)
Tallahossee FL 32303 City, State, and Zip
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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member MGRM	Brad A Chezem 2 3 Z128 Faulk Dr. III
	PH 4: 06 EE.FLORIDA
(Use attachment if necessary)	
ICLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	be specific and cannot be more than five business days
REQUIRED SIGNATURE:	buse or an authorized representative of a member.
• //	
(In accordance with s of this document con that the facts stated h	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)
of this document con that the facts stated h	stitutes an affirmation under the penalties of perjury