## LU9000107252

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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DEFAUTIVATION OF STATE OF CORPORATION TALLAHASSEE, FLORIDA

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O9 NOV -6 PM 4: 42

SECRETARY OF STATE OF CORPORATIONS

B. KOHR

NOV 6 2009

**EXAMINER** 

## **COVER LETTER**

TO:	Registration S Division of Co			므
SUBJE	ECT:	Agus L Name of Limite	ed Liability Company	09 NOV -6 PH 4: 54
The en	closed Articles of	f Organization and fee(s) are s	submitted for filing.	6 <b>空</b>
Please	return all corresp	ondence concerning this matte	er to the following:	بني ري
			Agustin.	5
			Name of Person	
			Firm/Company	<del></del>
		2788 To	enton cir Bristol	FL
			Address	
	·	City	32352. //State and Zip Code	
-		E-mail address: (to be used for	or future annual report notification)	
For fur	ther information	concerning this matter, please	•	
<del></del>	Agusti	of Person	at ( <u>85</u> ) <u>570 06 38</u> Area Code & Daytime Telephone Number	
Enclos	ed is a check fo	r the following amount:		
]\$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	of Status &
		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 LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Compar" "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:  2788 tantor Cir Bristol FL Bristol FL

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:

Asustin Varala

Name

2788 tanton Cir Bristol FL

Florida street address (P.O. Box NOT acceptable)

Bristol FL

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..

Registered Agent's Signature (REQUIRED)

(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> "MGRY = Manager "MGRN) = Managing Mem	Name and Address:
MGRM	Agustin Varela 2788 fenton Cir Bristol 74 32352
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary	
	than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days prior )
<u>REQUIRED</u> SIGNATURE	april on Voice (.
(In accordan	f a member or an authorized representative of a member.  ce with section 608.408(3), Florida Statutes, the execution ment constitutes an affirmation under the penalties of perjury
	Typed or printed name of signee
Filing Fees:	Typed of printed name of signed

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)