LU9000114710

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
· (Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



800162978408

OWISION OF CORPORATIONS
TALL AVASSEE, FLORIDA

RECEIVED

OPDEC -2 PH 4: 13

B. KOHR
DEC - 2 2009

EXAMINER

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12-02-09

NAME:

3004 LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

COST:

\$130

RETURN: CERTIFICATE OF STATUS

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

ARTICLES OF ORGANIZATION FOI	R FLORIDA LIMITED LIABILITY COMPA 💫
ARTICLE I - Name:	•
The name of the Limited Liability Compan	y is:
2004	
(Must end with the words "Limited	Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:
the maining address and sheet address of h	the principal office of the Emined Elability Company is.
Principal Office Address:	Mailing Address:
Curt Davis	Curt Davis
6932 Main Street	6932 Main Street
Frisco, Texas 75034	Frisco, Texas 75034
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
Florida Filing &	Search Services, Inc.
	lame
155 Office Pl	aza Drive, Suite A
Florida street address	(P.O. Box NOT acceptable)
Tallahassee, FL 323	301 _{FL}
City, Sta	ate, and Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complete	d to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all te performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S.

(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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR Curt Davis 6932 Main Street Frisco, Texas 75034 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a 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.) Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)