# 10000118402

(Requestor's Name)			
(Requestors Marrie)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name) 😥 🔑			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
W0900040412			

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D. BRUCE
DEC 14 2009
EXAMINER

# COVER LETTER -

Division of C				
SUBJECT:	Miz	ze Road FL, LLC		
	Name of Limit	ted Liability Company		<del></del>
The enclosed Articles	of Organization and fee(s) are	submitted for filing.		
Please return all corres	spondence concerning this mat	ter to the following:		
		Landon Roth		
		Name of Person		
	Frie	end Cooper, LLC		<del></del>
		Firm/Company		
	1901 Wes	t 47th Place, Suite 103		
		Address		The state of the s
	Wes	twood, KS 66205		09 C
	Ci	ty/State and Zip Code	·	HAN EC
				SE P
		for future annual report notificati	on)	PH 4: 22  OF STATE E. FLORIDA
For further information	n concerning this matter, pleas	e call:		SZ F
Laı	ndon Roth	at ( 913 )	387-2065	75 ZZ
Name	e of Person	Area Code & Daytime	Telephone Numb	er
Enclosed is a check t	for the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed	Certifica d) Certified	Filing Fee, te of Status & Copy copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Add Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	ations ater Circle	



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2009

LANDON ROTH FRIEND COOPER, LLC 1901 WEST 47TH PLACE, SUITE 103 WESTWOOD, KS 66205

SUBJECT: ASM-FL, LLC Ref. Number: W09000040412 OP DEC 11 PM 4: 22
SECRETARY OF STATE
TALLAHASSEF, FI OPINA

We have received your document for ASM-FL, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 109A00029845

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	oad FL, LLC  Ited Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
25706 W. 73rd Street Shawnee, KS 66227	25706 W. 73rd Street Shawnee, KS 66227
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address  CT Co.	of the registered agent are:  rporation System  Name  Name  Name  Registered Agent. You must designate an individual or another.  Registered agent are:  Registered agent are:  Registered Agent. You must designate an individual or another.  Registered Age
	ess (P.O. Box <u>NOT</u> acceptable)
	/3224 FT.
Plantation, FL 3 City	, State, and Zip

(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 Member	Name and Address:
Ronald E. Keith - Manager	25706 W. 73rd St., Shawnee, KS 66227
<del></del>	
(Use attachment if necessary)	
FICLE V: Effective date, if other than the n effective date is listed, the date must 190 days after the date of filing.)	be specific and cannot be more than five business days p
REQUIRED SIGNATURE:	
Signature of a memb	per or an authorized representative of a member.
(In accordance with s of this document con that the facts stated h	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)
Landon Roth, A	Attorney and Authorized Representative and Syped or printed name of signee
Filing Fees:	
\$125.00 Filing Fee for Articles of Org	ganization and Designation

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