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EXAMINER



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SECRETARY OF STATE DIVISION OF CORPORATION

COVER LETTER

•	ation Section of Corporations	
SUBJECT:	B.J.Pane	eque & Associates, LLC
		ited Liability Company
The enclosed Art	icles of Organization and fee(s) are	submitted for filing.
Please return all o	correspondence concerning this ma	tter to the following:
·	В	asilio Paneque
		Name of Person
		Firm/Company
	1038	3 SW 29th avenue
		Address
		mi, Florida 33135 ity/State and Zip Code
	bpa	neque@msn.com
For further inform	E-mail address: (to be used nation concerning this matter, pleas	for future annual report notification)
1 of farther inform	nation concesting this matter, pleas	e can.
Basilio Paneque Name of Person		at (786) 303 8530 Area Code & Daytime Telephone Number
Enclosed is a ch	eck for the following amount:	
]\$125.00 Filing	Fee \$130.00 Filing Fee & Certificate of Status	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	Street/Courier Address Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

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	l Liability Company	is:	
(Must end	B.J.Paneque & A with the words "Limited Li	Associates, LLC ability Company," "L.L.C.," or "LLC	2.")
ARTICLE II - Address The mailing address and		e principal office of the Limi	ited Liability Company is:
Principal Office Addre	ss:	Mailing Address:	
1038 SW 29th Avenue Miami, Florida 33135		1038 SW 29th Avenu Miami, Fla 33135	ie
ARTICLE III - Registe (The Limited Liability Company business entity with an active F The name and the Florid	cannot serve as its own Re lorida registration.) a street address of th		gent's Signature: an individual or another
 	Basilio Paneque Name		O VIO
	1038 SW 29th Avenue		SECRE VISION 9 DEC
	Florida street address (P.O. Box NOT acceptable)		2 FR
Miami, 33135 FL City, State, and Zip		FL e, and Zip	Y OF S CORPOR PM 12:
liability company at t registered agent and agr statutes relating to the	he place designated i ee to act in this capa proper and complete	to accept service of process foin this certificate, I hereby accept. I further agree to complete performance of my duties, and agent as provided for	or the above stated limited cept the appointment by ly with the provisions of all am familiar with and

(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:

Title: "MGRM" = Manager "MGRM" = Managing Member	Name and Address:
Basilio Paneque	Basilio Paneque 1038 Sw 29th Avenue Miami, Florida 33135
	
(Use attachment if necessary) ARTICLE V: Effective date, if other than the off an effective date is listed, the date must be or 90 days after the date of filing.)	date of filing: 13/18/09 (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	Lauegue
(In accordance with sect of this document constitute that the facts stated here	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury ein are true.) Panegue
Filing Fees:	
\$125.00 Filing Fee for Articles of Organ of Registered Agent	nization and Designation

\$ 5.00 Certificate of Status (Optional)

\$ 30.00 Certified Copy (Optional)