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(Requestor's	Name)
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PICK-UP W	AIT MAIL
(Business En	tity Name)
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COVER LETTER

TO: Registration S				2010 SE TAI
Division of Co	rporations			ES E
SUBJECT: A		,	11c.	FEB 26
	Name of Lim	ited Liability Company		R. R
				700
The enclosed Articles of	f Organization and fee(s) are	e submitted for filing.		DA 5
Please return all corresp	ondence concerning this ma	itter to the following:		P
Dar	noulis	Sikakij Name of Person	· · · · · · · · · · · · · · · · · · ·	
		•		
	···	Firm/Company		<u> </u>
		r min company		
660	2 GOVERNOR	s Drive		
		Address		
NE	D PORT R	ichey, FL	3463	72
12 1	J · ·	ty/State and S p Code		
<u> </u>	E-mail address: (to be used	for future annual report notification	n)	
For further information of	concerning this matter, pleas	se cail:		
Damoulis	BIKAKI	at (727) 847 Area Code & Daytime 1	-6763	<u> </u>
			•	
Enclosed is a check 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)	Certified (of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

A GIOS

The name of the Limited Liability Company is:

(Mass and Mass Mass Billion Bland	y company, biolon, or biolon,
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
NEW PORT BICKEY FL.	SAME
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the removed in the Plorida street address of the Plorida street address	gistered agent are:
Florida street address (P.O. E	
NEW PORT RICK City, State, and	34655 12ip
liability company at the place designated in th	ecept service of process for the above stated limited is certificate, I hereby accept the appointment as 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.

Page 1 of 2 (CONTINUED)

Registered Agent's Signature (REQUIRED)

Title:	Name and Address:	E.F.
"MGR" = Manager		I: 45
"MGRM" = Managing Member		
MGB	Damoulis Bik	alic
	6602 GOVERNORS	PRIVE
	NEW POET RICHEY	FL 34655
MERM	Damoutes Rital	المال
	6602 GOVERNORS	DRIVE
	NEW PORT RICHY	
MGR	FREDERIKA BI	KAKU Wajia
	10 Daymond 2a	
		6855
MGR	EUGENIA BIL	م اتر د
· · · · · · · · · · · · · · · · · · ·	6602 600 E10010	0.45
MCR	NEW PORT PIC	han FL3464
(Use attachment if necessary)	TONY Hajian	hey FL346
	10 2 aymond Kane	. Norwalk, a
LEV: Effective date, if other than the		(OPTIONAL) '
	pe specific and cannot be more than fiv	e business days prior
days after the date of filing.)	•	

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

Typed or printed name of signee

Filing Fees:

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

that the facts stated herein are true.)

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)