

L10VVVV39233

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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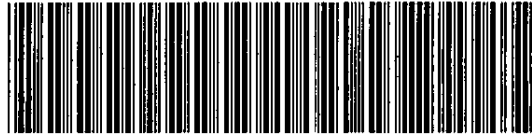
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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B. KOHR

APR 13 2010

EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 APR 12 AM 11:06

6572 Crews Vue Loop
Lakeland, FL 33813
April 8, 2010

To Whom It May Concern:

Please find enclosed my Articles of Organization for Florida Limited Liability Company along with my check #1672 in the amount of \$160 as follows: \$125 Filing Fee for Articles of Organization and Designation of Registered Agent, \$30 for Certified Copy and \$5 for Certificate of Status.

I am Ralph S. Soles, Sr. and my address is 6572 Crews Vue Loop, Lakeland, FL 33813. My daytime telephone number is 863-899-3933.

Please process my LLC as Phoenix Group Enterprises L.L.C.

Thank you.

Sincerely,



Ralph S. Soles, Sr.

enclosures

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 APR 12 AM 11:06

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Phoenix Group Enterprises,LLC

(Must end with the words "Limited Liability Company, "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:

6572 Crews Vue Loop

Lakeland FL 33813

Mailing Address:

6572 Crews Vue Loop

Lakeland FL 33813

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:

Ralph S Soles

Name

6572 Crews Vue Loop

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

Lakeland FL 33813

City, State, and Zip

10 APR 12 AM 11:06
DIVISION OF CORPORATIONS
STATE OF FLORIDA

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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Ralph S Soles

6572 Crews Vue Loop

Lakeland, FL 33813

(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.)

Ralph S Soles

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)