## 1100000045314

(F	Requestor's Name)
()	Address)
(4	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(C	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:
	A. LUNT

Office Use Only

APR 28 2010

**EXAMINER** 



500177532165

94/28/19--01972--098 \*\*160.00

2010 APR 27 PH 2: 05
SALVANASSEE, FLORIDA

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: The	Resonance Companies	s, LLC	
	<del></del>	ted Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
Alex Levy			2010 APR 27 SELIARIA SELIARIA
		Name of Person	PR PR
CyBear Inves	stments, LLC		27
		Firm/Company	그 그 그
1503 S. US F	lighway 301, Suite #14		7 m
<del></del>		Address	<u> </u>
Tampa, FL 3	3619		
		ty/State and Zip Code	
Alex@cybear			
		for future annual report notification)	
For further information	concerning this matter, pleas	e call:	
Alex Levy		at ( 813 ) 712-4114	
Name	of Person	Area Code & Daytime Telephone Num	ber
Enclosed is a check f	or the following amount:		
☑\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy Certific (additional copy is enclosed) Certifie	Filing Fee, rate of Status & rd Copy al copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations 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 Liability Compa	ny is:
The Decements Commented IVC	
The Resonance Companies, LLC	d Link The Community of L. C. Warning C. W.
(Must end with the words - Elimited	Page 1
ARTICLE II - Address:	
The mailing address and street address of	the principal office of the Limited Liability Company is:
	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1829 E. 4th Ave.	1503 S. US Highway 301
Tampa (Ybor City), FL 33605	1503 S. US Highway 301  Suite #14  Tomas El 33610
	Tampa, FL 33619
The name and the Florida street address of CyBear Investments,	•
	Name
1503 S. US Highway	y 301, #14
Florida str	eet address (P.O. Box <u>NOT</u> acceptable)
Tampa, FL 33619	FL
C	City, State, and Zip
liability company at the place designate registered agent and agree to act in this ca statutes relating to the proper and compl	nd to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as spacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and s registered agent as provided for in Chapter 608, F.S

Page 1 of 2

<b>ARTICLE IV</b>	- Manager(s	or Managing	Member(s):
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The name and address of each Manager or Managing Member is as follows:

"MGR" = M "MGRM" =	lanager Managing Member	Name and Address:	
MGR			5 c 20
WGK		Nicholas Volpe	
		1829 E. 4th Avenue	<del></del>
		Tampa (Ybor City), FL 33605	100 N
MGRM		Alex Levy	Ch-
	<del></del>	1503 S. US Highway 301, Suite #14	
		Tampa, Ft. 33619	<u></u>
		Tampa, TE 00010	
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		-	<u> </u>
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	ment if necessary)		
CLE V: Effec	ctive date, if other than th	be date of filing:be specific and cannot be more than	
CLE V: Effec effective date 0 days after t	ctive date, if other than th		
CLE V: Effec effective date 0 days after t	ctive date, if other than th is listed, the date must he date of filing.)		
CLE V: Effec effective date 0 days after t	etive date, if other than the is listed, the date must he date of filing.)  D SIGNATURE:	be specific and cannot be more than	five business days p
CLE V: Effec effective date 0 days after t	ctive date, if other than the is listed, the date must he date of filing.)  D SIGNATURE:  Signature of a member of	be specific and cannot be more than  ber or an authorized representative of a m	five business days p
CLE V: Effec effective date 0 days after t	etive date, if other than the is listed, the date must he date of filing.)  D SIGNATURE:  Signature of a member of	be specific and cannot be more than  the per or an authorized representative of a magnetic model. (3), Florida Statutes, the execution (608,408(3), Florida Statutes, the execution (608,408(3)), Florida Statutes, the execution (608,408(3)).	five business days particles of the business days days and the business days days days days days days days da
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CLE V: Effec effective date 0 days after t	etive date, if other than the is listed, the date must he date of filing.)  D SIGNATURE:  Signature of a member of	be specific and cannot be more than  ber or an authorized representative of a magnetion 608,408(3), Florida Statutes, the execution of the penalties of stitutes an affirmation under the penalties of	five business days particles of the business days days and the business days days days days days days days da

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)