# 10000115438

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SECRETARY OF STATE
STATE AND LAHASSEE, FLORID.

J. BRYAN

NOV -5 2010

**EXAMINER** 

# **COVER LETTER**

TO:

TO: Registration Division of C	Section Corporations		
SUBJECT: Suni	ight Group, LLC.		
		ted Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
Herman	Jones		
		Name of Person	
Sunlight	Group, LLC.		
		Firm/Company	
P.O. Box	x 343495		10 NOV
		Address	AET O
Florida Ci	ty, FLORIDA 3303	34	TARY ASSEI
-hj@sunligl	Continue of the continue of th	y/State and Zip Code SUNLIGHTGROUPLC.Co	of STI
	E-mail address: (to be used	for future annual report notification)	哥子
For further informatio	n concerning this matter, please	e call:	₹
Herman Jones		_at (786)_2847860	
Nam	e of Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check	for the following amount:		
125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & 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 P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	s

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Com	nany ic	
The name of the Elimited Elability Cont	pany is.	
Sunlight Group, LLC.		
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address:		,
The mailing address and street address of	of the principal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
12632 Colony Preserve Drive	P.O. Box 343495	
Boynton Beach, FL 33436	Florida City FL 33034	
(The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.)  The name and the Florida street address  Herman Jones  12632 Colon	Name  Name  Drive	gnature: or another or 10 NOV - 3 AHII: IL  ECRETARY OF STATE ALLAHASSEE, FLORIDA
	City, State, and Zip	

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:	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Member		
MGRM	Herman Jones	
	12632 Colony Preserve Drive	
	Boynton Beach FL 33436	
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		100 115
(Use attachment if necessary)		PRE :
	10/02/11/2	*>
LE V: Effective date, if other than the	date of filing: $\frac{10/4/2070}{}$	(OPTIONA
ffective date is listed, the date must be	e specific and cannot be more than fi	ve business day
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 that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

### Herman Jones

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)