# L10000127726

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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				
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N. Culfigan DEC 1 4 2010

### COVER LETTER

· TO:	Registration Section Division of Corporations		
SUBJE	ECT: Lienas Enterprises	•	
20242		Liability Company	
The end	closed Articles of Organization and fee(s) are su	bmitted for filing.	
Please	return all correspondence concerning this matter	to the following:	
:	Stefan N. Sassine		
		lame of Person	
* 1** * ***		irm/Company	
· · · · · · · · · · · · · · · · · · ·	Miramar, FL 33027	Address	
•	City/	State and Zip Code	·
For furt	ther information concerning this matter; please of	future annual report notification) all: at (954) 662-9579	
	Name of Person	Area Code & Daytime Telep	hone Number
Enclos	ed is a check for the following amount:		
<b>\$</b> 125.00	Filing Fee \$\sqrt{\sq}}}}}}}}}} \end{\sqrt{\sq}}}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\	\$155.00 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 Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	· // // .

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

got the suppose that is seen to be a first or an analysis of the second	age research
ARTICLE I - Name:	
The name of the Limited Liability Company is:	· "
Lienas Enterprises, LLC	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
- Commence of the state of the	
13742 SW 26th Street	13742 SW 26th Street
Miramar, FL 33027	Miramar, FL 33027
-ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another office, & Registered Agent's Signature:
business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
Stefan N. Sassine	<b>ຜ</b>
Name	<b>79</b> (3) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
137/12 SW/ 26th S	treet = \$

FL 3302/ City, State, and Zip

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

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		
MGR	Stefan N. Sassine	
	13742 SW 26th Street	
	Miramar, FL 33027	
	the state of the s	
and the second second second to the second s		
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date	te of filing: (OPTIONAL)	
(If an effective date is listed, the date must be sp	pecific and cannot be more than five business days price	r
to or 90 days after the date of filing.)		
		ഹ
REQUIRED SIGNATURE:		S
	그 선생님은 아이 아이를 들어 있다면 그 모든 그를	
and a second	J	֖֚֚֚֚֚֚֚֚֚֚֚֚֡֝֞֝֝֝֝֝֝֝֝֝֝֓֓֓֓֝֝֓֓֓֓֝֝֓֓֓֝֝֓֓֓֝ ֓֓֞֞֞֓֓֞֞֞
Signature of a member of	r an authorized representative of a member.	9

(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.)

## Stefan N. Sassine

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)