Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019
Phone : (305)552-5973
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FLORIDA LIMITED LIABILITY CO. BULLITT TRADING, LLC

Certificate of Status 1
Certified Copy 0
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Electronic Filing Menu

Corporate Filing Menu

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EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
BULLITT TRADING, 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: Mailing Address:
G156 GOLF VISTA WAY SAME
733433
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: RAMON ROMERO DE AVILA Name
GISG GOLF VISTA WAY Florida street address (P.O. Box NOT acceptable) BOCA PONLY FL. 39439 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.
MAY EST
Registered Agent's Signature (AEQUIRED)
(CONTINUED)
Page 1 of 2

H11000066744

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member MGR	RAMON ROMERO DE AVILA 6156 GOIF VIJA WAY POCA RAJON 33435	
	TARLAND AM 8: AM 8: DOR STA	
	i din w	
REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member.		
(In accordance with section 608.40 constitutes an affirmation under the I am aware that any false informatic constitutes a third degree felony as	8(3), Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true. ion submitted in a document to the Department of State provided for in s.8[7.155, F.S.)	
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)

Page 2 of 2