L 11000050228

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
•
Certified Copies Certificates of Status
,
Special Instructions to Filing Officer:

Office Use Only



300200465763

04/28/11--01002--005 **130.00

NOT INTENDED TO ACKNOWLEDGE SUFFICIENCY OF FILING RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

B. KOHR

APR 2 8 2011

EXAMINER

11 APR 28 PM 1: 25

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: AILEI	EN'S DRYWALL L	LC	
		ed Liability Company	- 1708
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.	18 C
Please return all corres	oondence concerning this matte	er to the following:	
LASHEL	LE KEEL		
		Name of Person	
		Firm/Company	
58 SIOU	X CIRCLE		
		Address	
HAVANA,			
	City	/State and Zip Code	
and the second s	E-mail address: (to be used for	or future annual report notification)	
For further information	concerning this matter, please	call:	
LASHELLE KEE	L	at (850) 539-5171	
Name	of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Certified Copy (additional copy is enclosed) \$160.00 Filing Certificate of S Certified Copy (additional copy is	tatus &
	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 COM

ARTICLE I - Name:

The name of the Limited Liability Company is:

AILEEN'S DRYWALL 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:

3577 FLAT CREEK RD

CHATTAHOOCHEE, FL 32324

3577 FLAT CREEK RD CHATTAHOOCHEE, FL 32324

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:

LASHELLE KEEL

Name

58 SIOUX CIRCLE

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

HAVANA

FL 32333 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:

MGRM	ENGLY M DE LEON
	3577 FLAT CREEK RD CHATTAHOOCHEE, FL 32324
MGRM	AMILCAR CRUZ VASQUEZ
	3577 FLAT CREEK RD
	CHATTAHOOCHEE, FL 32324
MGRM	FRANKLIN GUEVARA
	3577 FLAT CREEK RD
	CHATTAHOOCHEE, FL 32324
	,
Use attachment if necessary)	
LE V: Effective date, if other t	han the date of filing: (OPTION
ective date is listed, the date and days after the date of filing.)	must be specific and cannot be more than five business da

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.)

LASHELLE KEEL

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)

I, Engly M Deleon one the Managing members of Afleen's Drewall LIC (LOGODOS 8665) have no intention of Reinstating this Limited Wabiliy Company Engle Dream