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Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE FALLAHASSEF FI OBLE

J. BRYAN

MAY 2 7 2011

EXAMINER

COVER LETTER

TO:	Registratio Division of	n Section Corporations		
-SUR.	JECT: SDN	NB Enterprises		
501	, <u> </u>		ed Liability Company	
The e	nclosed Article	s of Organization and fee(s) are	submitted for filing	·
		espondence concerning this mat	_	
	<u>James</u>	S. Hewett	Name of Person	- PS - 1
			Name of Person	经3户
	SDNB E	Enterprises		- 55 C
			Firm/Company	Fig. 3
	1311 As	shboro Cir SE		MY 26 PH 2: 25 CRETARY OF STATE CRETARY OF STATE
			Address	THE COLUMN
	Dolos Day	. El 22000		ų-
	Palm Bay	y, FI 32909	y/State and Zip Code	·····
	shewett@	efl.rr.com	y/otate and 21p code	
	<u>onowork</u>		for future annual report notification)	
For fi	urther informati	on concerning this matter, please	e call:	
Jan	nes S. Hew	ett	at (321) 373-4703	
	Nai	me of Person	Area Code & Daytime Telep	hone Number
Enclo	osed is a check	c for the following amount:		
√ \$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$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 Ci Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SDNB Enterprises, 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:
1311 Ashboro Cir SE	1311 Ashboro Cir SE
Palm Bay, Fl 32909	Palm Bay, FI 32909

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:

James S.	Hewett
***	Name
1311 As	shboro Cir SE
-	Florida street address (P.O. Box NOT acceptable)
Palm Bay	_{FL} 32909
	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:

MGR		James S. Hewett
	_	1311 Ashboro Cir SE
		Palm Bay, Fl 32909
		EURETARY OF STAIL
	_	777 777
		mg
		FLOGI
	-	
(Use attachment if	necessary)	
LE V: Effective da	ate, if other than the	date of filing: (OPTION
fective date is liste	ed, the date must be	e specific and cannot be more than five business da
dana after the dat	e of filing.)	
days after the dat		
REQUIRED SIG	NATURE:	

(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.)

James S. Hewett

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)