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11 JUL 28 PH I2: 31
USING OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

11 JUL 28 PH R: 47

SECNITARY OF STATE

MINISTRANCE FLORID

D. BRUCE

JUL 28 2011

**EXAMINER** 

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: DAY STAR LL C  Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kenneth Packer
Name of Person
DAYSTAR LLC
Firm/Company
P.O.Box 14642; TALLAHASKE Fla 32308
Address
TAllahassee Florida 32317  City/State and Zip Code
DAYSTAR 1515 At Hotmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (\$50) 590-2646 Res Rea Code & Daytime Telephone Number 75
Enclosed is a check for the following amount:
\$125.00 Filing Fee Line Status Status Status Status Status Certificate of Status Certified Copy (additional copy is enclosed)  \$155.00 Filing Fee Line Status Statu
Mailing Address  Registration Section  Registration Section  Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

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:
1799 1451 Melvin St.	P.O.BOX 14642 TANAMASSEC FIA 32317
TAllahasse Fla 32301	1 Allahassec F14 32317
	red Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Rep	gistered 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:

Name

Florida street address (P.O. Box NOT accentable

Florida street address (P.O. Box NOT acceptab

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)

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) \_\_. (OPTIONAL) **ARTICLE V:** Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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 for

constitutes an affirmation under the penalties of perjury that the facts stated herein are frue. I am aware that any false information submitted in a document to the Department of State

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)

constitutes a third degree felony as provided for in s.817.155, F.S.)