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AMMINER

COVER LETTER

	on Section f Corporations		
SUBJECT:	2401 Bay	shore LLC.	
	Name of Limited L	Liability Company	
The enclosed Articl	es of Organization and fee(s) are sub-	mitted for filing.	
Please return all con	rrespondence concerning this matter t	o the following:	
 	Waffa G. Rass	Sam me of Person	
	E:	m/Company	
	3596 Mossy	Creek lane	
	Tallahassee F	[323]	
	9 1 rassame yal		
For further information	tion concerning this matter, please cal	II;	
Waffa _N	L. Rassam at ame of Person	(<u>850</u>) <u>284-2</u> Area Code & Daytime Tele	2678 phone Number
Enclosed is a chec	k for the following amount:		
\$125.00 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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

ARTICLE I - Name:

ARTICLE II - Address:

Principal Office Address:

The name of the Limited Liability Company is:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individualness entity with an active Florida registration.)			
The name and the Florida street address of the registered agent are:			
Waffa G. Raccam			
3596 Mossy Creek Lane Florida street address (P.O. Box NOT acceptable)			
City, State, and Zip			
Having been named as registered agent and to accept service of process for the liability company at the place designated in this certificate, I hereby accept the registered agent and agree to act in this capacity. I further agree to comply with statutes relating to the proper and complete performance of my duties, and I an accept the obligations of my position as registered agent as provided for in C	ne appoin 1 the prov 11 familia	itment visions r with	as of all and
Registered Agent's Signature (REQUIRED)			
(CONTINUED)	SECR	11 AI	and the
Page 1 of 2	ETARY O HASSEE.	JG 29 PI	

The name and address of each M	anager of Managing Member is as follows.	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Amer G. Raccam 3596 Morry Creek Jano	
MGRM	Waffa G. Rassam	—
	3596 Moscy Creek Lar Tallahacree FL 32311	
		
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(Use attachment if necessary) CLE V: Effective date, if other than	n the date of filing: (OPT)	IONAL
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