<u>L12000011000</u>

(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
		
		· 1
Special Instructions to Filing Officer:		
<u> </u>		

Office Use Only



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Effective Date 01/20/12

01/23/12--01055--008 **62.50

01/23/12--01055--009 **62.50

2012 JAN 23 PH 2: 31
SECRETARY OF STATE

J. BRYAN

JAN 24 2012

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	7.0
The name of the Limited Liability Company is:	ALLE CR.
Paul - Hawkins Inter (Must end with the words "Limited Liabilit	cions LLC
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1931 NW 38th ST. OAKLAND PARK FL 33309 ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered)	
business entity with an active Florida registration.)	,
The name and the Florida street address of the re	gistered agent are: Effective Date $OI/20/12$
JAMES Kiselica Name	
1931 NW 38th St Florida street addr	
Oak/And PK City, Stat	FI 33309
City, Stat	e, and Zip
	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as

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

_ ·	s) or Managing Member(s): ach Manager or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Mer	Name and Address:
"MGR"	JAMES Kiselica 1931 NW 38 12 St Cakland Pk FL 33309
"MER"	George Bailey 3632 NE 24th Ave Ft. Lancercate, FL 33308
(Use attachment if necessar	y)
ARTICLE V: Effective date, if other (If an effective date is listed, the date or 90 days after the date of filing	te must be specific and cannot be more than five business days prior
REQUIRED SIGNATURE	Ę:
(In accordance with constitutes an affirm I am aware that any constitutes a third d	of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document nation under the penalties of perjury that the facts stated herein are true. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.) AMES KISELICA Typed or printed name of signee
Filing Fees:	
\$125.00 Filing Fee for Artic of Registered Agen \$ 30.00 Certified Copy (Op	

\$ 5.00 Certificate of Status (Optional)