4/2000/2007

(Re	equestor's Name)	<u></u>
(Ad	dress)	 -
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	. <u>.</u>
Certified Copies	_ Certificates	of Status

Special Instructions to Filing Officer:

A. LUNT

MAY 30 2011

EXAMINER

Office Use Only



100235556661

05/29/12--01049--007 **155.00

2012 HAY 29 PH & 49
SECNETARY OF STATE
TALLAHASSEE, FLORID.

Sales of the sales

COVER LETTER

TO:	Registration Section / \ Division of Corporations		
SUBJE	Derediz Ent	erprises, LLC	
	Name of Limited Lia	bility Company	
The end	closed Articles of Organization and fee(s) are submi	tted for filing.	
Please r	return all correspondence concerning this matter to t	he following:	
-		Torres Jr.	
	Name	of Person	
-		terprises, LLC	, ,
	Finn/	Company/	
_	2460 NW	/ 115th Ave	<u> </u>
	Α	ddress	
	Coral Sprin	gs, FL 33065	2012 HAY 29
_	City/State	and Zip Code	Pri I rea
_		es@gmail.com	
For furt	E-mail address: (to be used for futu ther information concerning this matter, please call:	ire annual report notificati	on)
	Derediz Torres Jr.	843	276 2246
	Name of Person	Area Code & Daytime	Telephone Number
Enclose	ed is a check for the following amount:		
\$125.00	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 Add Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is	
The name of the Ellined Elability Company	15.	
Derediz Ente	rprises, LLC	1 4 4 B
(Must end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")	Market at
ARTICLE II - Address:		AR 29 L
The mailing address and street address of the	e principal office of the Limite	d Liability.Company is:
Principal Office Address:	Mailing Address:	
2460 NW 115th Ave	2460 NW 115th Ave	
Coral Springs, FL 33065	Coral Springs, FL 33065	
		
Na	he registered agent are: Torres Jr. me 115th Ave	
	address (P.O. Box NOT acceptable	:)
Coral Springs	_{FL} 33065	
City	, State, and Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as references. Registered Agent's Signature of the proper and complete accept the obligations of the proper accept the proper accept the obligations of the proper accept the proper	in this certificate. I hereby acce acity. I further agree to comply e performance of my duties, and	ept the appointment as with the provisions of ali I I am familiar with and

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

	= Manager I" = Managi	ng Member	Name and	Address:		
MGRM	Ū	•		Derediz Torres Jr.	 .	Ħ
				2460 NW 115th Ave	1717	3100
				Coral Springs, FL 33065	李浩	THE STATE OF THE S
			- ,		SE	\sim
					$\Omega \subset$	_ (p) _
					m <u>o</u>	_ <u></u>
			··· ···		1-2 C/3	_ ೣೢ
						.CT
	· · · · · · · · · · · · · · · · · · ·					-
						-
			_			-
				 * :		-
						_
(Use atta	achment if n	ecessary)				
CLE V: E	Effective date	e, if other than the d	late of filing:		(OPTIC	ONA
) days aft	late is listed ter the date <u>RED</u> SIGN	of filing.)	specific and ca	nnot be more than fiv	e business	days
KEQUI			or an dishorized	representative of a mem	 her	
	Dif	and the of the member		-		
					•	
	constitutes I am aware	an affirmation under t	the penalties of peration submitted in	tutes, the execution of this rjury that the facts stated he a document to the Departn s.817.155, F.S.)	erein are tru	€.

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)

Typed or printed name of signee