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## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT:	Name of Limite	ed Liability Company		
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.		·
Please return all corresp	pondence concerning this matte	er to the following:		
	TUAN T	DANG		
		Name of Person		
	TIVLE	Firm/Company		<del></del> -
		Firm/Company		
	410 COUNTRY	WOOD CIB.		
		Address		
	LAKE MARY	FL. 32741 y/State and Zip Code	ø	
<u> </u>	Cit	y/State and Zip Code	7.2	23
V	KEC BURDHA	10 contraction		<u> </u>
<del></del>	E-mail address; (to be used f	or future annual report notification)	<b>主</b> 行	- <b>E</b>
	concerning this matter, please		Y KA	78 - 5 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6
		<b>,</b>		
THAN DE	ANG	at (407 ) 721 · 3  Area Code & Daytime Telep	3970 \$5	<b>්</b> ජ
Name	of Person	Area Code & Daytime Telep	3970 SA ohone Number	10 :04 HV
Enclosed is a check f	or the following amount:		7 <del>.</del> ***	-£-"
2 \$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 eacle	&
	Mailing Address Registration Section Division of Corporations P.O. Boy 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building		

P.O. Box 6327 Tallahassee, FL 32314

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 Liabili	٠	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC,")	
ARTICLE II - Address:		
The mailing address and street address of the pri	incipal office of the Limited Liabilit	ty Company is:
Principal Office Address:	Mailing Address:	
1	1	
410 COUNTRY WOOD CIE	410 COUNTRY WOOD	CM.
LAKE MARY FI. 32746	LANE MARY FL 32741	·
ARTICLE III - Registered Agent, Registered		
(The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	ered Agent. You must designate an individual o	or another
The name and the Florida street address of the re	egistered agent are:	<b>≅</b> ⊗ <b>₹</b>
, Tua	1 Dany	
Name		<b>8 </b>
At .		9 5 E
Hio country wo Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	BETARY OF S
Florida street add  Lave Maey  City. Sta	FI 327410	
City, Sta	te, and Zip	
Having been named as registered agent and to a		ve stated limited
liability company at the place designated in th	his certificate, I hereby accept the ap	pointment as
registered agent and agree to act in this capaci		
all statutes relating to the proper and complete and accept the obligations of my position as reg		
Registered Agent's Signatu	are (REQUIRED)	
(CONTINU	UED)	

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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member THAN DANG 410 COUNTRY WOOD GIR. LOVE MARY FL- 32746 LOGGENE BRADFORD 410 country wood c14. LAKE MACY FL 3274 b (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 of an authorized representative of a member.

(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.)

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)