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SECRETARY OF STATE

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243-53898

0CT = 4 2013 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Proenix Name of Limited Liability Company
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:
Joel L. Tallant Sp.
Name of Person
.Firm/Company
164 Del Monte Road
Address
Sobastian, FL 32958 City/State and Zip Code
al al TITO ADI COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Toel L. Tallant Sk. at (772) 538 - 7674 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations

Registration Section
Division of Corporation:
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661-Executive-Center-Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

13 OCT -4 PM 3: 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 27, 2013

JOEL L TALLANT SR 164 DEL MONTE RD SEBASTIAN, FL 32958

SUBJECT: PHOENIX, L.L.C. Ref. Number: W13000053898

We have received your document for PHOENIX, L.L.C. and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

Most financial institutions require the name(s) and address(es) of the manager(s) - MGR's or Managing Member(s) - MGRM's to be reflected on our records in order for the business entity to open a bank account. You may wish to revise your document to include the name, address, and title of each manager or managing member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton Regulatory Specialist III Registration/Qualification Section

Letter Number: 813A00022786

www.sunbiz.org

Division of Corporations DO ROV 6227 Tallahaggaa Florida 22214

ARTICLES OF ORGANIZATION FOR FLORIDA LINGTED LIABILITY COMPANY

ARTICLÉ I - Name:				
The name of the Limited Liability Company is:	seach 11.0	จ		
Dr. 222 K	secon Lich	- .		
(Must end with the words "Limited Liability	y Company, "L.I.C.," or "LIC.")			
ARTICLE II - Address: The mailing address and street address of the print	ncinal office of the Limited Liah	ility Company is:		
		· ·		
Principal Office Address:	Mailing Address:			
164 Des Monte Rd	164 Rel Monte	22		
Sobastian, PL	Sebastian Fc			
02458	32	5428		
ARTICLE III - Registered Agent, Registered				
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ed Agent. You must designate an individu	al or another		
The name and the Florida street address of the re-	gistered agent are:			
Joel L. Ta'	Ilarit 82			
Name		·		
164 Del Mon	le Rd			
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)			
Sebastian, Fl 32958				
Citý, Stati	e, and Zip			
Having been named as registered agent and to ac				
liability company at the place designated in the registered agent and agree to act in this capacit				
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 reg	istered agent as provided for in (Chapter 608, F.S		
Quel & O	allow &.			
Registered Agent's Signam	re (REQUIRED)			
•		201 SE		
CONTINU	(ED)			
Page 1 of 2	•	FIL 2013 OCT -3 SECRETARY ALLAHASSE		
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ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _ (OPTIONAL) (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 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.) Iallan 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)