

L14000115035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

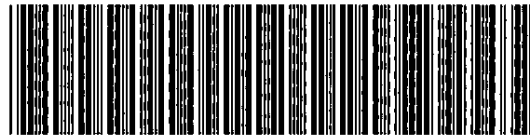
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 2852 Demaret Drive LLC
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:

Jerry W. Allender
Name of Person

Allender & Allender, PA
Firm/Company

719 Garden Street
Address

Titusville, Florida 32796
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jerry W. Allender at (321) 269-1511
Name of Person Area Code Daytime Telephone Number

Enclosed is a check 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 Circle
Tallahassee, FL 32301

ARTICLE IV -

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

“AMBR” = Authorized Member

“MGR” = Manager

AMBR

Michael A. Boffo
2625 Riviera Drive
Titusville, Florida 32780

AMBR

Gordon P. Boffo
2625 Riviera Drive
Titusville, Florida 32780

AMBR

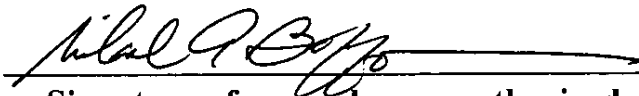
Matthew S. Boffo
2625 Riviera Drive
Titusville, Florida 32780

ARTICLE V: Effective date, if other than the date of filing: _____
(OPTIONAL)

ARTICLE VI: Other provisions, if any:
A member managed LLC

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REQUIRED SIGNATURE:



Signature of a member or authorized representative of a member.

Michael A. Boffo

Type 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)