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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: <u>EAGLE ALTERATIONS AND CU</u> Name of Lii	STOM TAYLORING mited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this π	natter to the following:	
	MARGARETTE DAGR	Name of Person	.
		Firm/Company	, , , , , , , , , , , , , , , , , , ,
	9860 W SAMPLE ROAD	Address	
	CORAL SPRINGS FLORIDA 3306	85 City/State and Zip Code	
	AGCOUTURE@AOL.COM E-mail address: (to be use ther information concerning this matter, ples	d for future annual report notifica	ation)
	SARETTE DAGRIN at () Name of Person	954) 213-7914	lephone Number
Enclose	ed is a check for the following amount:		
□ \$125 .0	0 Filing Fee □\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	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 Corporal Clifton Building 2661 Executive Cent Tallahassee, FL 3236	tions SS To the ter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
EAGLE ALTERATIONS AND CUSTOM TAYLORIN	IG 11 C	
	Liability Company, "L.L.C.," or "LLC.")	-
ARTICLE II - Address:		
The mailing address and street address of the principal of	fice of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
9860 W SAMPLE ROAD	9860 W SAMPLE ROAD	_
CORAL SPRINGS FLORIDA 33065	CORAL SPRINGS FLORIDA 33065	-
ARTICLE III - Registered Agent, Registered Office, & The Limited Liability Company cannot serve as its own I another business entity with an active Florida registration. The name and the Florida street address of the registered in the company of the registered in the florida street address of the registered.	Registered Agent. You must designate an indiv n.)	idual or
MARGARETTE	DAGRIN	
Name		
9860 W SAMPLE ROAD Florida street address (P.O. Box	NOT acceptable)	
CORAL SPRINGS	FL 33065	
City	Zip	
Having been named as registered agent and to accept servithe place designated in this certificate. I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the obliging Chapter Agent's Signature.	the appointment as registered agent and agree of all statutes relating to the proper and complete igations of my position as registered agent as proper 605, F.S	to act in this e performance
(CONTINUE		
Page 1 of 2	BRANE WAY OF STAKE ALEMHASSEELFLORIDA 3	15 APR IL PH II: 38

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager MGR	RONY JEANLAURENT	
INOIX	9860 W SAMPLE ROAD	
	CORAL SPRINGS FL 33065	
	· · · · · · · · · · · · · · · · · · ·	
		
(Use attachment if necessary)		
ective date is listed, the date must be specific a	nd cannot be more than five business days prior to	or 90 d
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of filing.) LE VI: Other provisions, if any.	nd cannot be more than five business days prior to	
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