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## **COVER LETTER**

TO: Registration Section . Division of Corporations
SUBJECT: Pude 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:
Daniel Trudel
Name of Person  Name of Person  Firm/Company
4415 106 st west Address
Bradenton FL 34210
City/State and Zip Code  27772 Q 1/2 huo - Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing Address  New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle

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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 Liability Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited I	Liability Company is:
Principal Office Address:	Mailing Address:
4415 106 st west Braden tov, FL 39210	Same
ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent. Y another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	le C
4415 106 st west Florida street address (P.O. Box <b>NOT</b> acc	centable)
Braden for FL	34210_
City State	Zip
Having been named as registered agent and to accept service of process for the appaintment as registered further designated in this certificate, I hereby accept the appointment as registered further agree to comply with the provisions of all statutes relating to the proper of am familiar with and accept the obligations of my position as registered agent as	d agent and agree to act in this capacity. I and complete performance of my duttes, and T
Carl C	
Registered Agent's Signatu	re (REQUIRED)
(CONTINUED)	1960 1960 1960

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
No others		
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(Use attachment if necessary)		
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