# L1600076659

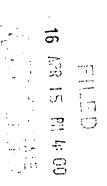
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(Document Number)
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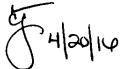
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## COVER LETTER

	egistration Section ivision of Corporations
SUBJECT	STEVEN WEISS L.C.
	Name of Limited Liability Company
The enclos	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rm all correspondence concerning this matter to the following:
	STEVEN WEISS
	Name of Person
	Firm/Company
	19721 PRINCE BENJAMIN DR
	Address
	LUTZ PZ 33549
	City/State and Zip Code SWEiSS 40 O AMAIL. Com
	E-mail address: (to be used for future annual report notification)
For further in	nformation concerning this matter, please call:
	STEVEN DEISS at 813 718-3246  Name of Person Area Code Daytime Telephone Number
	Name of Person Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:
<b>]\$125</b> .00 Fi	lling Fee \$\ \times \text{\$130.00 Filing Fee & Status} \ \text{Certificate of Status} \ \text{(additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \$160.00 Filing Fee, Certified
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 3230153

## EFFECTIVE DATE ON 11/10

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The same of the Limited Liebility Company is:	
The name of the Limited Liability Company is:	16 APR 15 PM 4: 00
STEVEN WEISS L.L.C.	
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	[12] [14] [14] [15] [15]

### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<b>Mailing Address:</b>
19721 PRINCE BENJAMIN DR	P.O. BOX 149
LUTZ, PR 33549	LUTE, FL 33548
	·

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

STE	TEN	WEISS	
19721 PR	Name	Bos) ramin	) Da
Florida street address (			<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>
LUTE	12	3354	9
City	State	Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of 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 registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager  AMBR	STEVEN WEISS
	1872 PRINCE BENSAMIN
	LUTZ, FR 33549
AMBR	ROBIN WEISS
	19721 PIZINCE BENJAMIN
	LUTE, FE 33549
-	
(Use attachment if necessary)	
EV: Effective date, if other than the date ective date is listed, the date must be sport filling.) the date inserted in this block does not me	ecific and cannot be more than five business days prior to or 90 neet the applicable statutory filing requirements, this date will no
of filing.)	exific and cannot be more than five business days prior to or 90
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E V: Effective date, if other than the date ective date is listed, the date must be specifiling.) the date inserted in this block does not ment's effective date on the Department of E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a me This document is executed any false constitutes a third degree	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.  Typed or printed name of signee  Filing Fees: ganization and Designation of Registered Agent

ARTICLE IV-

Page 2 of 2

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