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(City/State/Zip/Phone #)					
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SEC. ARY OF STATE ORIDA

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## **COVER LETTER**

	Registration Section Division of Corporations				
CUD IEC	7039 FAIR LANE, LLC				
SUBJEC	Name of Limited Liability Company				
The encl	osed Articles of Organization and fee(s) are submitted for filing.				
Please re	eturn all correspondence concerning this matter to the following:				
	SANDRA RAMOS AND BARRY C KNOUSE				
	Name of Person				
		_			
Firm/Company					
6906 BARRY ROAD					
	Address	16	SEC		
	TAMPA, FL 33634	- A			
	SERAMOS 11 @ UERLYDIN. 118 H				
	E-mail address: (to be used for future annual report notification)	h Hd	: <del>=</del> {C		
For further	r information concerning this matter, please call:	ų: I7	CRID.		
	SANDRA RAMOS 813 453-3887 at ( )				
	Name of Person Area Code Daytime Telephone Number				
Enclosed	d is a check for the following amount:				
	Filing Fee \$\frac{130.00}{2}\$ Filing Fee & S155.00 Filing Fee & Certificate of Status  (additional copy is enclosed)  \$\frac{160.00}{2}\$ Filing Fee, Certificate of Status  Certified Copy  (additional copy is enclosed)				
	Mailing Address  New Filing Section  New Filing Section				

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:							
The name of the Limited Liability Company is:							
7039 FAIR LANE, LI	LC						
(Must end w	ith the words "Limited	l Liability Compa	ıny, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address.	dress of the principal o	office of the Limit	ed Liability Company is:				
The maining address and street ad-	uress of the principal c	Thee of the Emili	ou blue my company is.				
<u>Principa</u>	l Office Address:		Mailing Address:				
6906 Barry Road		_ 69	906 Barry Road				
Tampa, FL 33634	<del></del>	T	ampa, FL 33634				
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:							
Jeffrey J. McDonald							
Name							
2759 Camden Road							
Florida street address (P.O. Box NOT acceptable)							
	Clearwater	FL	33759				
	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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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TALL AND SECURIORIES

**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	S. I. Damas
<u>MGR</u>	Sandra Ramos
	6906 Barry Road
	Tampa, FL 33634
AMBR	Barry C. Knouse
	6906 Barry Road
	Tampa, FL 33634
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date	
the date of filing.)	specific and cannot be more than five business days prior to or 90 days after of meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Departition	in of State 5 feedings.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
	San Kando
	2000 K (VOOR)
	member or an authorized representative of a member.
	cuted in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any ta	alse information submitted in a document to the Department of State gree felony as provided for in s, 817.155, F.S.
constitutes a third deg	nee leiony as provided for this of 7.133, r.s.
	Sand Sand SANORA RAMOS
	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)

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