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## COVER LETTER

Division of Corporations
SUBJECT: BAILERS MARKET ENTER PRISES LLC Name of Limited Liability Company
Nation contract courts outputy
The enclosed Articles of Organization and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
TROY WHYTE  Name of Person
Name of Person
BAILERS MHRKET ENTERPRISES LLC
FirmyCompany
7529 GRANT ST
Address
Hollywood, FC 33024 City/State and Zip Code
SI LORANDA DA DA FYEITE COM
5/ Jeg ROJP 2007 & Excite. COM  E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
They whyTe at (954) 588-3845  Name of Person Area Code Daytime Telephone Number
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 \$ Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Street Address
New Filing Section New Filing Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 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:

[JA/ICA5 MANKC] [AMUST end with the words "Limited Lia	NICKPRISES LLC
(Must end with the words "Limited Lial	bility Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address	Mailing Address:
7529 GRANT ST HONYWOOD, FL 33024	7529 GRADT ST HOHYWOOD PL 33014
ARTICLE III - Registered Agent, Registered Office, & R (The Limited Liability Company cannot serve as its own Reg another business entity with an active Florida registration.)	
The name and the Florida street address of the registered age	
GIOVANA N	MOlipu me
Na	me
119 MIAHI	GARLON RL D. Box NOI acceptable)
Hollywood	FC 330 Z 3 State Zip
City	State Zip
Having been named as registered agent and to accept service of place designated in this certificate, I hereby accept the appoint further agree to comply with the provisions of all statutes relatin am familiar with and accept the obligations of my position as re	nent as registered agent and agree to act in this capacity. I ag to the proper and complete performance of my duties, and I
Dorighan	Accept's Street to (PEOLUPEO)

(CONTINUED)
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<u>Titler</u> "AMBR" ≈ Authorized Member	Name and Address.
"MGR" = Managery	712 19407-
ANBRINGR	Jan WATTE
, , , ,	TROY WHYTE 7529 GRANT ST HOHY WOOL, FL 33024
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	nte of filing:
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