L17000/89616

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)	 	
Cenified Copies	_ Certificates	of Status	
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<u> </u>			
Special Instructions to	Filing Officer		

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT MARK BRINDLEY 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:				
MARK BRINDLY. Name of Person				
BRINDLEY LLC. Firm/Company				
7110 Bycyskin Ro				
TALL FL 32309. City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
MARLY Ramoley at (850) 228-1014 Name of Person Area Code Daytime Telephone Number				
Enclosed is a check for the following amount: \$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{ Certified Copy (additional copy is enclosed)} \text{ Certified Copy (additional copy is enclosed)} \text{ 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 Tallahassee, FL 32314 Z661 Executive Center Circle Tallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Lia	bility Company is:			
MARK	BRINDLEY	LLC		
(Must	contain the words "Limited Liabi	lity Company, "L.L.C.," or	"LLC.")	
ARTICLE II - Address: The mailing address and stre	eet address of the principal office	of the Limited Liability Co	ompany is	
		_		

Principal Office Address:	Mailing Address:
7110 RuckshillO	SAME
TALL 1-L 37709	
· · · · · · · · · · · · · · · · · · ·	

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:

MANY BRINDCEY

Name

7110 BUYSKIN D'

Florida street address (P.O. Box NOT acceptable)

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)

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This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)