L20000 3/6/05

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer	
Leill us at	
1:00 P) Quo	
J'YCURL	





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COVER LETTER

Mailing Address

New Filing Section

Division of Corporations

TO:

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

Street Address

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
MATTHEW TAND 7 PA (Must contain the words "Limited Liabil	operites of the L.L.C., or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address: 538 W. 474 AVE	Mailing Address:
TALLAHASSEE, FL 32303	
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Registration.) The name and the Florida street address of the registered agent Stratung House Name and Street address (P.O. Florida street ad	istered Agent. You must designate an individual or in are: CLLTASSINOPTH THE THE THE THE THE THE THE
Having been named as registered agent and to accept service of place designated in this certificate. I hereby accept the appoint of further agree to comply with the provisions of all statutes relating am familiar with and accept the obligations of my position as reasonable. Registered	nent as registered agent and agree to act in this capacity. I ag to the proper and complete performance of my duties, and I

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Monager	Suca de la la desce modil
_/VIGR	STERLING MOLIZNOWKIA
/	-538 W. 474 HUE
	TALLAHASSEE, FL 32303
	///
(Use attachment if necessary)	
(Ose attachment in necessary)	
RTICLE V: Effective date, if other than the	date of filing: (OPTIONAL)
f an effective date is listed, the date must b	e specific and cannot be more than five business days prior to or 90 days after
ne date of filing.)	not meet the applicable statutory filing requirements, this date will not be listed as
he document's effective date on the Departr	nent of State's records.
ne document serietive date on the papara.	
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
	LOCAL TO THE REAL PROPERTY OF THE PARTY OF T
<u> </u>	a member or an authorized representative of a member.
This document is e	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
	egree felony as provided for in s.817.155, F.S.
TER	TING HOLLTAX SWORTH
<u> </u>	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)

ARTICLE IV-