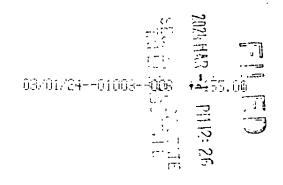
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(Address)
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(City/State/Zip/Phone #)
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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: ZEKI + S TEIGCH CONTRACT CONTR
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person
Firm/Company
4651 KUSSENS FOID LEWIS
City/State and Zip Code (City/State and Zip Code
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□S125.00 Filing Fee □S130.00 Filing Fee & □S155.00 Filing Fee & □S160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & □S160.00 Filing Fee, Certified Copy (additional copy is enclosed) (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
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	Convic	64 C Cory
(Must contain the words "Limited Liability C	CALIFE LOR.	Recioes Clos

ARTICLE II - Address:

another

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

Principal Office Address:	Mailing Address:
Enit Wynd	SAME (165) VISSELS FORL CONT
" Trong the Chines	- Chistorissens par Lane
ARTICLE III - Registered Agent, Registered Office, & I (The Limited Liability Company cannot serve as its own Re	Registered Agent's Signature:
another business entity with an active Florida registration.)	

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

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

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 turther 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)

ART	ICL	F	IV_{-}
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. . .

The name and address of each person authorized to manage and control the Limited Liability Company:

	iorizen wiember		
"AMBR" = Autl "MGR" = Mana			
MOK = Mana	ger T	. V v	
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