1		
•	TRANSMITTAL LETTER FOR FLOAD ALL MITED LIABILITY COMPAN	Y
	19700000	360
	Department of State Division of Corporations P. O. Box 6327	
	SUBJECT: Core Alexander Core Alexander	1 1
	SUBJECT: (Proposed limited liability company name - must include	e suffix)
	Enclosed is an original and one (1) copy03/	21046361 05/9701050002 *337.50 ****337.50
	Filing fee for articles of organization of Florida Limited Liability Company:	
	\$250.00 Filing fee for Articles of Organization and Affidavit \$ 35.00 Designation of Registered Agent	
	A letter of acknowledgement will be issued free of charge upon filing. Please st additional \$8.75 if a certificate of status is needed. The fee for a certified copy in Please send one check for the total amount made payable to the F	is \$52.50.
	Department of State.	P HAI
	FROM: _ Rhonda Corey Cline Name (Printed or typed)	R 26 AH
	11062 NW 29th St	AH 10: 06
	Coral Springs, FL 3	3065
\mathbb{C}_{2}	M (954) 341 - 8776 Daytime Telephone number	184 - 184
DI	327	



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 11, 1997

RHONDA COREY KLINE 11065 NW 29TH ST CORAL SPRINGS, FL 33065

SUBJECT: COREY, L.C. Ref. Number: W97000005684

We have received your document for COREY, L.C. and check(s) totaling \$337.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6878.

Terri Buckley Corporate Specialist

Letter Number: 797A00012348



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 20, 1997

RHONDA KLINE 11065 NW 29 STREET CORAL SPRINGS, FL 33065

SUBJECT: COREY ALEXANDER & COMPANY L.C.

Ref. Number: W9700006522

We have received your document for COREY ALEXANDER & COMPANY L.C., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$337.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6923.

Doris McDuffie Corporate Specialist Supervisor

Letter Number: 397A00014150

Dear Doris

my check is in the Gorey LC.

Thank you for finding the check
to advising me on what to

do. Rhondu Kline

3/24/94

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The same of the Limited Lightlite Company in
Corey Alexander &
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company $100500029+1005$
Coral Springs, FL 3306 FE 3
Coral Springs, FL 3306 Fig =
The period of duration for the Limited Liability Company shall be:
SER P
indefinite perpetual
ARTICLE IV - Management:
(check and complete the appropriate statement)
The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:
The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:
Glenn And Rhonda Klike
11065 NW 2.9+h St
Coral Springs, FL
33065

CERTIFICATE OF DESIGNATION OF 12/LARY OF REGISTERED AGENT/REGISTERED OFFICE ARASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the limited liability company is:			
	Corey Alexander	& Company L.C.		

2. The name and address of the registered agent and office is:

Rhonda Corey Kline
(N:ME)
11065 NW 29th 5+
(P. O. Box <u>not</u> acceptable)
Coral Springs, FL 33065
(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.

Rhonde Kline 3/5/97

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS MAR 26 AM 10: 06 TALLAMASSEE, FLORIDA

The undersigned member or authorized representative of a member of Corey deposes and say	Alexander & Company L.C. vs:
1) the above named limited liability company has at least two members (Clark) 2) the total amount of cash contributed by the member(s) is	April Rhonda
3) if any, the agreed value of property other than cash contributed by member(s) is A description of the property is attached and made a part hereto.	\$ <u>019</u> .
4) the amount of cash or property anticipated to be contributed by member(s) is	s_
5) the total amounts of 2, 3 and 4 is	s

Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)