

LO500004/203

Florida Department of State
Division of Corporations
Public Access System

FILED

2005 APR 26 A 9:30

Electronic Filing Cover Sheet

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000103536 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608) 827-5300
Fax Number : (608) 827-5501

RECEIVED
05 APR 26 PM 12:17
DIVISION OF CORPORATIONS

LIMITED LIABILITY COMPANY

Check Criminal LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

AL

Electronic Filing Menu

Corporate Filing

Public Access Help

FAX AUDIT # H05000103536 3

FILED

2005 APR 26 A 9:30

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
OF
Check Criminal LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **Check Criminal LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 18384 93rd Rd. North, Loxahatchee, Florida 33470.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.


ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2045.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Patricia Griffiths, 18384 93rd Rd. North, Loxahatchee, Florida 33470


Business Filings Incorporated, Organizer
Mark Schiff, AVP
Authorized Representative
Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr. Suite 200,
Madison, WI 53717
(608) 827-5300

FAX AUDIT # **H05000103536 3**

**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE**

FILED

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, ^{2005 APR 26 A 9:30}
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE ^{SECRETARY OF STATE}
STATE OF FLORIDA. ^{TALLAHASSEE, FLORIDA}

The name of the limited liability company is: **Check Criminal LLC**

The name and address of the registered agent and office is **Business Filings Incorporated,**
1203 Governors Square Blvd, Suite 101, Tallahassee, Florida 32301-2960. Located in
the County of Leon.

Having been named as registered agent and to accept service of process for the above
stated 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.

Signature: _____



Mark Schiff, AVP
Business Filings Incorporated

Date: April 26, 2005

FAX AUDIT # **H05000103536 3**