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(Requestor's Name)
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(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Cassial Instructions to Filips Officer
Special Instructions to Filing Officer:
JUN 22 2010
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EXAMINER

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96/21/10--01048--008 **130.00

ALLAHASSES, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations		,
SUBJECT: 98 blue, 11	C mited Liability Company	
The enclosed Articles of Organization and fee(s) a	are submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Soniia W	Name of Person	~ ~
J	Name of Person	WILL BIG
98 Blue,	llc	
	Firm/Company	<u> </u>
2100 W. Bed	ach Drive # H203	## 3
	Address	2: F
Panama City,	TL 3240/ City/State and Zip Code	Each Co
	•	
Sonjia 9 98 blue	ed for future annual report notification)	
For further information concerning this matter, ple		
Sonjia Whit field Name of Person	at (850) 447-1840 Area Code & Daytime Telephone Nu	mber
Enclosed is a check for the following amount:		
□\$125.00 Filing Fee & Certificate of Status	Certified Copy Certification (additional copy is enclosed) Certification	00 Filing Fee, icate of Status & ied Copy mal copy is enclosed)
Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compa	ny is:
98 blue	lle
(Must end with the words "Limited	d Liability Company, "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:	Mailing Address:
	2100 W. Beach Drive # 11203 Panama City, Fl 32401 stered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another and the registered agent are:
Sonjia W	Name SS NO
2100 W. Beach Florida str Panama Citu	eet address (P.O. Box NOT acceptable) FL 32401
	City, State, and 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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

Title: "MGR" = Manager "MGRM" = Managing M	Name and Address:
MGR_	Sonjia Whitfield 2100 W. Beach Dr. #H203 Panama City, Fl 32401
(Use attachment if necess	
LE V: Effective date, if of ffective date is listed, the of days after the date of fili	ther than the date of filing: 15 2010 . (OPTION date must be specific and cannot be more than five business dag.)
LE V: Effective date, if of fective date is listed, the days after the date of filing required SIGNATU.	ther than the date of filing: 15 2010 . (OPTION date must be specific and cannot be more than five business dag.)
ELE V: Effective date, if of ffective date is listed, the conditional days after the date of filing signature. (In according this do not be a conditional days after the date of filing signature.)	ther than the date of filing: <u>U15 2010</u> . (OPTION date must be specific and cannot be more than five business dans.) RE:

ARTICLE IV- Manager(s) or Managing Member(s):

** , , s

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)