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**Division of Corporations** 

Fax Number : (850)617-6381

#### From:

Account Name: REGISTERED AGENTS INC.

Account Number: 120090000081 : (307)200-2803 Fax Number : (855)330-1010

> \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:		
Emaii Address:		

# FLORIDA LIMITED LIABILITY CO.

## The Disc Shop, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The Disc Shop.				
(Must	t contain the words "Limited	Liability Company,	"L.L.C" or "LLC.")	
ARTICLE II - Address:				
The mailing address and str	reet address of the principal o	ffice of the Limited	Liability Company is:	
<u>Pr</u>	incipal Office Address:		Mailing Address:	
7901 4th St N			1 4th St N	
STE 300		מירם	: 300	
St. Petersburg, I  ARTICLE III - Registere	d Agent, Registered Office,	St. I & Registered Age	Petersburg, FL 33702 nt's Signature:	יין אינון בו מער דים
St. Petersburg, 1  ARTICLE III - Registere (The Limited Liability Con another business entity wit	d Agent, Registered Office, npany cannot serve as its own h an active Florida registratio	St. I & Registered Age Registered Agent. n.)	Petersburg, FL 33702	· -
St. Petersburg, 1  ARTICLE III - Registere (The Limited Liability Con another business entity wit	d Agent, Registered Office, npany cannot serve as its own	St. I & Registered Age Registered Agent. n.)	Petersburg, FL 33702 nt's Signature:	. t
St. Petersburg, 1  ARTICLE III - Registere (The Limited Liability Con another business entity wit	d Agent, Registered Office, npany cannot serve as its own h an active Florida registratio	St. I & Registered Age Registered Agent. n.) l agent are:	Petersburg, FL 33702 nt's Signature:	. t
St. Petersburg, 1  ARTICLE III - Registere (The Limited Liability Con another business entity wit	d Agent, Registered Office, npany cannot serve as its own h an active Florida registration street address of the registered	St. I & Registered Age Registered Agent. n.) l agent are:	Petersburg, FL 33702 nt's Signature:	· -
St. Petersburg, 1  ARTICLE III - Registere (The Limited Liability Con another business entity wit	d Agent, Registered Office, npany cannot serve as its own h an active Florida registration street address of the registered	St. I  & Registered Agent. n.) I agent are: c. Name	Petersburg, FL 33702 nt's Signature:	THE ARTHURAL
St. Petersburg, 1  ARTICLE III - Registere (The Limited Liability Con another business entity wit	d Agent, Registered Office, npany cannot serve as its own h an active Florida registration treet address of the registered Registered Agents In	St. I  & Registered Age Registered Agent. on.)  I agent are:  C.  Name	Petersburg, FL 33702  nt's Signature: You must designate an individual or	· -
St. Petersburg, 1  ARTICLE III - Registere (The Limited Liability Con another business entity with	d Agent, Registered Office, npany cannot serve as its own han active Florida registratio street address of the registered Registered Agents In 7901 4th St N STE 3	St. I  & Registered Age Registered Agent. on.)  I agent are:  C.  Name	Petersburg, FL 33702  nt's Signature: You must designate an individual or	· -

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
AMBR	James Riccio 7901 4th St N STE 300 St. Petersburg, FL 33702	
AMBR	Nicholas Skidmore 7901 4th St N STE 300 St. Petersburg, FL 33702	
<del></del>		
(Use attachment if necessary)		
ffective date is listed, the date must be s e of filing.)	te of filing:	lays prior to or 90 day
TLE VI: Other provisions, if any.		

Signature of a member or an authorized representative of a member.

This document is 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 constitutes a third degree felony as provided for in s.817.155, F.S.

Morgan Noble

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)