

L04000040237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

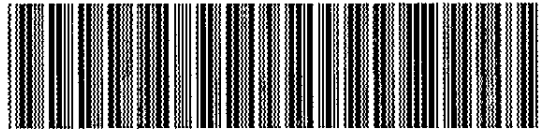
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
04 MAY 27 AM 11:45
DIVISION OF CORPORATION
FILED
04 MAY 27 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Copeland LLC

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- Art of Inc. File _____
- LTD Partnership File _____
- Foreign Corp. File _____
- L.C. File _____
- Fictitious Name File _____
- Trade/Service Mark _____
- Merger File _____
- Art. of Amend. File _____
- RA Resignation _____
- Dissolution / Withdrawal _____
- Annual Report / Reinstatement _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
- UCC 11 Retrieval _____
- Courier _____

Signature _____

Requested by: AW 5/27
Name Date Time

Walk-In _____ Will Pick Up _____

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The name of the Limited Liability Company is:

COPELAND LLC

ARTICLE II

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

1019 S. TENNESSEE AVE.
LAKELAND, FL 33803

ARTICLE III

The purpose for which this Limited Liability Company is:

ANY AND ALL LAWFUL BUSINESS PRINCIPAL ACTIVITY TO BE, BUT NOT LIMITED TO, MANAGERS, PROMOTERS AND INDEPENDENT ARTIST, WRITERS, AND PERFORMERS.

ARTICLE IV

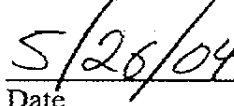
The name and Florida address of the registered agent is:

KYLE GRINER
1019 S. TENNESSEE AVE.
LAKELAND, FL 33803

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 his 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 Signature



Date

ARTICLE V

The following individuals are officers of the Limited Liability Company:

Aaron March, President
2919 Woodland Hills Ave.
Lakeland, Fl 33803

James Likeness, VP
10456 Sovereign Dr.
Largo, Fl 33774

Bryan Laurenson, Treasurer
528 Norton Lane
Arnold, MD 21012

Each officers share an equal 33 1/3 percent in the Limited Liability Company.