L03000028114

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Document Number)
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W03000019946 789/2848/671 LO3-28114 7/31/03

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	-
SUBJECT: PEABODY GRAPHICS	
(Name of Limited Liabi	lity Company)
The enclosed Articles of Organization and fee(s) are Please return all correspondence concerning this mat	_
•	
DAVID LEE	
(Name of Person)	
PEABODY GRAPHICS, LLC	
(Firm/Company)	
1221 NW 95TH AVE.	
(Address)	
PLANTATION, FL 33322	
(City/State and Zip Code)	
For further information concerning this matter, pleas	e call:
DAVID LEE at (954) 473-0899
	rea Code & Daytime Telephone Number)
Registration Section Division of Corporations 409 E. Gaines Street	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 15, 2003

DAVID LEE 1221 NW 95TH AVE. PLANTATION, FL 33322

SUBJECT: PEABODY GRAPHICS Ref. Number: W03000019946

We have received your document for PEABODY GRAPHICS and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the designation "L.L.C." "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

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

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick Document Specialist

Letter Number: 503A00041558

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is: PEABODY GRAPHICS 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:
1221 NW 95TH AVE.	1221 NW 95TH AVE.
PLANTATION, FL 33322	PLANTATION, FL 33322

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

DAVID LEE	
1	Vame
1221 NW 95TH AV	Ξ.
Florida street addres	s (P.O. Box NOT acceptable)
PLANTATION	FL 33322
City, S	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

(CONTINUED)

Page 1 of 2

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	DAVID LEE
-	1221 NW 95TH AVE.
	PLANTATION, FL 33322
(Use attachment if necessary)	

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

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

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

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2