

L00000008809

Requester's Name

Jonathan McDaniel

Address

3063 Layla St.

City/State/Zip

Phone #

Tallahassee, FL 32303

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

800003330068--4

-07/20/00-01079-012

\*\*\*155.00 \*\*\*155.00

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

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|-----------------------------------|---|--|
| <input type="checkbox"/> Walk in  | <input type="checkbox"/> Pick up time _____ | <input type="checkbox"/> Certified Copy        |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait          | <input type="checkbox"/> Certificate of Status |
|                                   | <input type="checkbox"/> Photocopy          |  |

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED  
00 JUL 20 PM 1:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

L00-8809  
7/25

Examiner's Initials

**Articles Of Organization  
For  
Florida Limited Liability Company  
  
Capital Unlimited L.L.C.**

**ARTICLE I - Name:**

The name of the Limited Liability Company is Capital Unlimited L.L.C.

**ARTICLE II - Address:**

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

3063 Layla Street  
Tallahassee, Florida 32303

**ARTICLE III - Duration:**

The Limited Liability Company shall dissolve no later than December 31, 2070.

**ARTICLE IV - Management:**

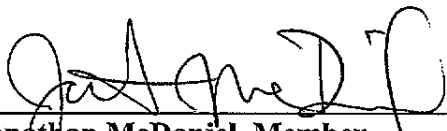
The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Jonathan McDaniel  
3063 Layla Street  
Tallahassee, Florida 32303

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**ARTICLE V - Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: **NONE.**



**Jonathan McDaniel, Member**

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

**Filing Fee: \$125.00 for Articles and Affidavit**

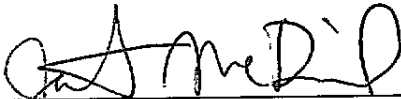
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is Capital Unlimited L.L.C.
2. The name and the Florida street address of the registered agent is:

Jonathan McDaniel  
3063 Layla Street  
Tallahassee, Florida 32303

*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.*

  
\_\_\_\_\_

Jonathan McDaniel, Registered Agent

**Filing Fee: \$ 25 for Designation of Registered Agent**

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TALLAHASSEE, FLORIDA