

JAN-18-02 FRI 12:26 PM

Division of Corporations

P. 1

https://ccfss.dos.state.fl.us/scripts/efilecovr.exe

L02000000458

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000017647 7)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850) 385-6735
Fax Number : (954) 641-4192

02 JAN 18

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 JAN 18 PM 12:32

LIMITED LIABILITY COMPANY

BOX OF BONES LLC

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

#0200017647

ARTICLES OF ORGANIZATION
OF
BOX OF BONES LLC

I, the undersigned as organizer of a limited liability company, under the Florida Limited Liability Company Act, adopt the following Articles of Organization for such limited liability company:

ARTICLE I - NAME

The name of the limited liability company is BOX OF BONES LLC.

ARTICLE II - DURATION

The period of duration of this limited liability company shall be 1-30 years from the date of the issuance of a Certificate of Organization by the State of Florida.

ARTICLE III - PRINCIPAL OFFICE

The address of the principal office of this limited liability company is 4710 Grapevine Way, Davie, Florida 33331 and the mailing address shall be the same.

ARTICLE IV - REGISTERED AGENT AND OFFICE

The name of the initial registered agent within Florida is ELISE ROSS and the street address is 4710 Grapevine Way, Davie, Florida 33331.

ARTICLE V - MEMBERS

This limited liability company has one (1) member whose name and address is:

Elise Ross
4710 Grapevine Way
Davie, Florida 33331

No additional members shall be admitted unless all members (including any additional members other than original member) shall

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
025 JAN 18

#0200017647

H02000017647

unanimously agree, and on such terms and conditions as shall be agreed unanimously.

The death, retirement, resignation, expulsion, bankruptcy or dissolution of any member, or the occurrence of any event which terminates the continued membership of a member of this limited liability company shall terminate this company, unless the remaining members shall unanimously agree to continue the business of the company, in which event, this company shall not so terminate.

ARTICLE VI - MANAGEMENT

The management of the company is reserved to the members of the company, in proportion to their contributions to the capital of the limited liability company. The power to adopt, alter, amend or repeal the regulations of this limited liability company shall be vested in the members of the company.

The name and address of the managing member is:

Elise Ross
4710 Grapevine Way
Davie, Florida 33331

IN WITNESS WHEREOF the undersigned incorporator has executed these Articles of Organization on this 18 day of January, 2002.

Elise Ross
ELISE ROSS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JAN 18

H02000017647

JAN-18-02 FRI 12:27 PM

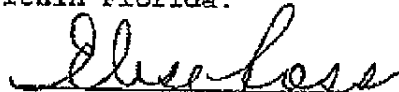
P. 4

H02000017647

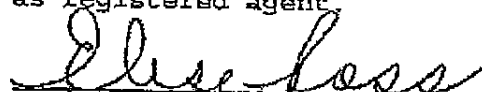
CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE
FOR THE SERVICE OF PROCESS WITHIN FLORIDA
NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In compliance with Section 607.0501, Florida Statutes, the following is submitted:

First that BOX OF BONES LLC, desiring to organize or qualify under the laws of the State of Florida, has named ELISE ROSS whose address is 4710 Grapevine Way, Davis, Florida 33331, as its agent to accept service of process within Florida.


ELISE ROSS

Having been named to accept service of process for the above-stated corporation, at the place designated in this Certificate, I hereby agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registered agent.


ELISE ROSS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 JAN 18

H02000017647