

L020000001548

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-01/03/02--01039--004
***125.00 ***125.00

RE: PACK RAT FURNITURE & JUNQUE SHOP, LLC

Dear Sir:

Enclosed please find the original and one copy of the Articles of Organization for a Florida Limited Liability Company, which includes the designation of the registered agent, together with my check in the amount of \$125.00 for filing same.

Thank you for your prompt attention to these matters. Please return the letter of acknowledgement to:

RALPH L. MADACSI
3572 LEWIS SPEEDWAY
ST. AUGUSTINE, FL ~~32085~~

rm
32084

Sincerely,

Ralph L. Madacsi

enclosures

W02-563
WY
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JAN 22 PM 12:51

GP



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

January 8, 2002

RALPH L. MADACSI
3572 LEWIS SPEEDWAY
ST. AUGUSTINE, FL 32084

SUBJECT: PACK RAT FURNITURE & JUNQUE SHOP, LLC
Ref. Number: W02000000563

We have received your document for PACK RAT FURNITURE & JUNQUE SHOP, LLC 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 document must contain both the street address of the principal office and the mailing address of the entity.

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

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 402A00000931

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ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY

OF

PACK RAT FURNITURE & JUNQUE SHOP, LLC

The undersigned, acting as the registered agent of the Limited Liability Company under the Florida General Corporation Act, adopts the following Articles of Organization:

ARTICLE I

NAME: The name of the Limited Liability Company is PACK RAT FURNITURE & JUNQUE SHOP, LLC.

ARTICLE II

REGISTERED OFFICE AND REGISTERED AGENT: The street address and telephone number of the initial registered office is 3572 LEWIS SPEEDWAY, ST. AUGUSTINE, FLORIDA ~~32085~~ (904) 829-1461.

32084 P.M.

The name of the initial registered agent is RALPH L. MADACSI, who is familiar with and accepts of the duties and responsibilities as Registered Agent for said Limited Liability Company.

PRINCIPAL OFFICE AND ADDRESS is the same as the REGISTERED OFFICE.

The Mailing address is 3572 Lewis Speedway St Augustine, FL 32084.

PRINCIPAL OFFICE is the location where service of process can be accepted.

The street address is also 3572 Lewis Speedway, St. Augustine, FL 32084

ARTICLE III

DURATION: The Limited Liability Company shall have a perpetual existence.

ARTICLE IV

PURPOSE: The purpose of the Limited Liability Company is to engage in any lawful act or activity for which may be now or hereafter organized under the laws of the State of Florida.

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ARTICLE V

POWERS: The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

ARTICLE VI

MANAGEMENT: This Limited Liability Company shall have one (1) manager, and is therefore, a managed Company. The name and address of the manager is as follows:

<u>NAME</u>	<u>MAILING ADDRESS</u>
RALPH L. MADACSI	3572 LEWIS SPEEDWAY <i>RM.</i> ST. AUGUSTINE, FL <i>32085 820</i>

ACCEPTANCE BY REGISTERED AGENT

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.

12-13-01
DATE

Ralph L. Madacsi
RALPH L. MADACSI
Registered agent

JLD

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STATE OF FLORIDA

COUNTY OF St Johns

Before me, the undersigned authority, personally appeared RALPH L. MADACSI who is to me well known to be the person described in and who subscribed the above Articles of Organization, and she did freely and voluntarily acknowledge before me according to law that she made and subscribed the same for the users and purpose therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereto set my hand and my official seal, at Prosser, Fla in said County and State this 13th day of December, 2001.

Stephanie S Waldron
Notary Public, State of Florida



Stephanie S Waldron
My Commission DD050258
Expires August 15, 2005

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