# LO200008323 ROBINAPR -5 AM 8: 45 POLY APR -5 AM 8: 45 PALLAHASSEE, FLORIDA

Office Use Only

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

l(Corporation Name)	(D)	· .
Corporation Name)	(Document #)	2000051958427 -04/05/0201062008
(Corporation Name)	(Document #)	****125.00 ****125.00
(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	<del> </del>
☐ Walk in ☐ Pick up time _		Certified Copy
☐ Mail out ☐ Will wait	☐ Photocopy	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	±
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R. Change of Registe Dissolution/Witho	
OTHER FILINGS	REGISTRATION/QL	<u>UALIFICATION</u>
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnersh ☐ Reinstatement ☐ Trademark ☐ Other	ip
		Examiner's Initials

CR2E031(7/97)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Big C Advertising, LLC

### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Compa

1188 South Ponte Vedra Blvd.

Ponte Vedra, Florida 32082

MARKED AN 8:45 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Ms. Cynthia Hall		
Name		
1188 South Ponte Vedra Blvd.		
Florida street address (P.O. Box NOT acceptable)		
Ponte Vedra, FL 32082		
City, State, and Zin		

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.

### Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

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)