

L030000011860

DAVID A. Lovell
108 6th AVENUE

ST. PETE BEACH, FL 33706

(Address)

(City/State/Zip/Phone #)

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4-2-03



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

March 24, 2003

DAVID A. LOVELL
108 6TH AVE.
ST. PETE BEACH, FL 33706

SUBJECT: ELECTRA WIRELESS, LLC
Ref. Number: W03000008346

We have received your document for ELECTRA WIRELESS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6025.

Trevor Brumbley
Document Specialist

Letter Number: 903A00017814

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AND
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**The name of the Limited Liability Company is: ELECTRA WIRELESS, LLC.**ARTICLE II - Address:**

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

108 6TH AVE, ST. PETE BEACH, FL 33701**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

DAVID A. LOVELL108 6TH AVE.(727) 363-7125Florida street address (P.O. Box **NOT** acceptable)ST. PETE BEACH, FL, 33706

City, 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.

David A. Lovell

Registered Agent's Signature

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

David A. Lovell

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.)

DAVID A. LOVELL

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)

\$160.00SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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