

L03 0000 15063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900015847979

04/28/03--01074--001 **155.00

RECEIVED
03 APR 28 PM 11:33
FILING OFFICE
TALLAHASSEE, FLORIDA

FILED

L03-15063
OK

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Go Get Mom, LLC

Signature

Requested by:

SW

4/28

Name

Date

Time

Walk-In

Will Pick Up

Art of Inc. File

LTD Partnership File

Foreign Corp. File

L.C. File

Fictitious Name File

Trade/Service Mark

Merger File

Art. of Amend. File

RA Resignation

Dissolution / Withdrawal

Annual Report / Reinstatement

Cert. Copy

Photo Copy

Certificate of Good Standing

Certificate of Status

Certificate of Fictitious Name

Corp Record Search

Officer Search

Fictitious Search

Fictitious Owner Search

Vehicle Search

Driving Record

UCC 1 or 3 File

UCC 11 Search

UCC 11 Retrieval

Courier

TALLAHASSEE, FLORIDA

03 APR 28 PM 12:04

FILED

ARTICLES OF ORGANIZATION FOR
Go-Get-Mom, LLC
A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is: **Go-Get-Mom, LLC**

ARTICLE II - ADDRESS

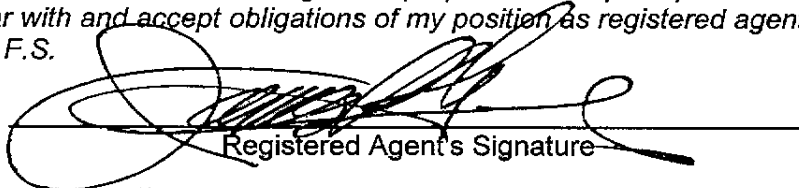
The mailing address and street address of the principal office of the Limited Liability Company is: **2207 Windwood Place, Valrico, FL 33594.**

ARTICLE III - REGISTERED AGENT

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

James P. Graf
2207 Windwood Place
Valrico, FL 33594

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 obligations of my position as registered agent as provided for in Chapter 608, F.S.


Registered Agent's Signature

FILED
03 APR 28 PM 12:06
TALLAHASSEE, FLORIDA

ARTICLE IV - MANAGEMENT

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

ARTICLE VI - EFFECTIVE DATE

This Limited Liability Company is to become effective upon the listing of this certificate with the Secretary of State.

IN WITNESS WHEREOF, these Articles of Incorporation have been signed, as Managing Members, by: **JAMES P. GRAF** and **DONNA C. GRAF**.

Dated this 25 day of April, 2003.


JAMES P. GRAF
Managing Member


DONNA C. GRAF
Managing Member

E:\1 OPEN\Graf, James and Donna\LLC ART ORG1.frm

FILED
03 APR 28 PM 12:04
TALLAHASSEE, FLORIDA

**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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

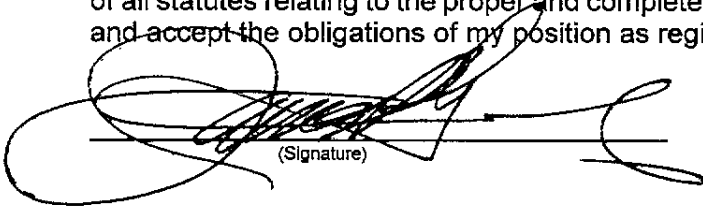
1. The name of the limited liability company is: **Go-Get-Mom, LLC**
2. The name and address of the registered agent and office is:

James P. Graf
(Name)

2207 Winwood Place
(Address P. O. Box NOT Acceptable)

Valrico, FL 33594
(City/State/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.


(Signature)

4/25/03
(Date)

Filing Fee: \$25 for Designation of Registered Agent

FILED
03 APR 28 PM 12:04
TALLAHASSEE, FLORIDA