# Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : I20010000247 Phone : (305)674-3313 Fax Number : (305)675-2811

LIMITED LIABILITY COMPANY

LEDBADGE LLC

Certificate of Status	0
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JIVISION OF CORPORATION

\$500

### ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608,F.S.

#### NAME ARTICLE

The name of the Limited Liability Company is:

LEDBADGE LLC

#### ARTICLE II <u>ADDRESS</u>

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

1931 S. OSPREY AVENUE

SARASOTA, FLORIDA 34239

#### ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REIGSTERED AGENT SIGNATURE

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

JUDITH SPARKS

1931 S. OSPREY AVENUE

SARASOTA, FLORIDA 34239

Having been named as registered agent to accept service of process for the above stated maying been rained as registered agent and accept the certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. Butther 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..

#### MANAGEMENT ARTICLE IV

The Limited Liability Company is to be managed by one OR more members and is, therefore a, member managed company.

## ARTICLE V MEMBERS (optional)

Member.

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JUDITH SPARKS

1931 S. OSPREY AVENUE

SARASOTA, FLORIDA 34239

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Signature of a member or an authorized representative of a member.

(In accordance with section 608.406(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

JUDITH SPARKS

Typed or printed name of signes

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