

U030000039146

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

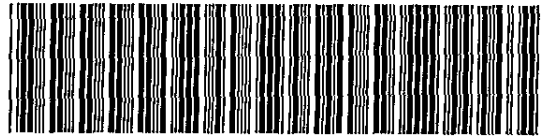
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03 OCT -6 AM 9:48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**TRANSMITTAL LETTER
ARTICLES OF ORGANIZATION**

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

October 3, 2003

SUBJECT: PROVIDENCE ASSOCIATES, LLC

Enclosed is an original and one (1) copy of the Articles of Organization and a check for \$125.00.

Filing fee for Articles of Organization of Florida Limited Liability Company:

\$ 100.00 Filing fee for Articles of Organization
\$ 25.00 Designation of Registered Agent

Please return photocopy enclosed "stamped with the filing date."

FROM: Susan L. Kidd/Seabreeze Bookkeeping & Tax Service, LLC
Name (Printed or Typed)

P.O. Box 229
Address

Daytona Beach, FL 32115-0229
City, State & Zip

(386)258-5880
Daytime Telephone Number

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PROVIDENCE ASSOCIATES, LLC

ARTICLE II - Address:

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

621 Beville Road
South Daytona, Florida 32119

ARTICLE III - Managing Member

The name and street address of the managing member are:

Claudia M. Gosline
621 Beville Road
South Daytona, Florida 32119

ARTICLE IV- Effective Date

The effective date of the Limited Liability Company is:

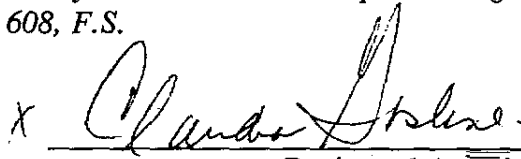
October 9, 2003

ARTICLE V - Registered Agent:

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

Claudia M. Gosline
621 Beville Road
South Daytona, Florida 32119

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 for in Chapter 608, F.S.

x 

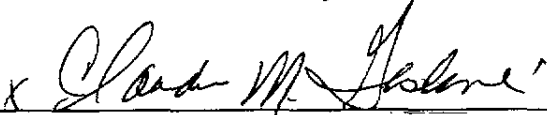
Registered Agent's Signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV - Management:

The Limited Liability company is to be managed by the members. The name and street address of the managing member are:

Claudia M. Gosline
621 Beville Road
South Daytona, Florida 32119

x 

Signature of managing member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Claudia M. Gosline