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EFFECTIVE DATE
10/24/03

77



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 4, 2003

JOHN C. WENRICK
JOHN C. WENRICK, CPA PA
1976 ALTERNATE 19 S.
TARPON SPRINGS, FL

SUBJECT: BRUSPAKIM, LLC
Ref. Number: W03000032342

We have received your document for BRUSPAKIM, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Enclosed is a blank copy of our current form. Please either use that form, or correct your form. The name of the document must be "Articles of Organization;" we do not file operating agreements. The name of the entity must include the suffix and must appear identically throughout your document.

Please also note that your transmittal letter did not provide the zip cod for the address to which we have mailed this letter.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 303A00059935

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRUSPAKIM, LLC

W03-32342

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name: John C. Wenrick
Company: John C. Wenrick, CPA PA
Address: 1976 Alternate 19 S.
Tarpon Springs, FL

For further information concerning this matter, please call:

John C. Wenrick at (727) 944-5979

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STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

ARTICLES OF ORGANIZATION

OF

BRUSPAKIM, LLC

ARTICLE I:

This Articles of Organization of Bruspakim, LLC (the Company) a limited liability company, organized pursuant to the Florida Limited Liability Company Act, is executed effective as of the 24th. Day of October, 2003 by and among the Company and the persons executing this agreement as the initial members.

ARTICLE II:

The mailing address of the principal office of the limited liability company is:

Principal Office Address:

420 Partridge Circle
Sarasota, Fl. 34236

Mailing Address:

420 Partridge Circle
Sarasota, Fl. 34236

ARTICLE III:

The Company shall continue in existence until dissolved in accordance with the Company's Articles of Organization, unless the Company is earlier dissolved and its affairs wound up in accordance with the provisions of this Agreement or the Act.

ARTICLE IV:

The Limited Liability Company is to be managed by members and the names and addresses of such members who are to serve as managers are:

Name and Address:

Ronald M. Saba , Manager Member
420 Partridge Circle
Sarasota, Fl. 34236

Richard T. Zalasdy, Manager Member
420 Partridge Circle
Sarasota, Fl. 34236

ARTICLE V:

The names, addresses and Membership Interests of the Members are as reflected in Schedule I attached.

New members to the Company may only be admitted with the unanimous consent of the Members, upon compliance with all terms specified by the Managers and upon receipt by the determined Contribution.

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ARTICLE VI:

An annual meeting of the Members will be held at such time and date at the principal office of the Company or at such other place as is designated by the Managers from time to time and stated in the notice of the meeting.

IN WITNESS WHEREOF, the undersigned, being the initial Manager has caused this agreement to be duly adopted by the Company as of the 24th day of October, 2003 and do hereby assume and agree to be bound by and to perform all of the terms and provisions set forth in this Agreement.



RONALD M. SABA

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SCHEDULE 1

Ronald M. Saba
420 Partridge Circle
Sarasota, Fl. 34236

70%

Richard T. Zalasdy
420 Partridge Circle
Sarasota, Fl. 34236

30%

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CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATION THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: BRUSPAKIM, LLC

The name and address of the registered agent and office is:

Ronald M. Saba

420 Partridge Circle

Sarasota, Fl. 34236

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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: Ronald M. Saba

Date: 10-24-03