

L03 0000 46692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

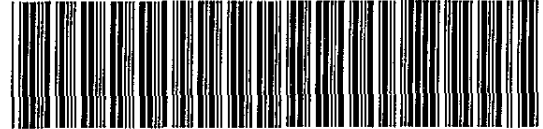
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900024747099

11/19/03--01061--011 \*\*155.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 NOV 19 PM 1:47

FILED

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TAMPA BAY ACQUISITIONS, LLC  
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Cammie Warburton  
(Name of Person)

NEVADA CORPORATE CENTER INC.  
(Firm/Company)

1151 Airport Road, Suite 2  
(Address)

Minden, Nevada 89423  
(City/State and Zip Code)

For further information concerning this matter, please call:

Cammie Warburton at ( 775 ) 782-2201  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 NOV 19 PM 1:47

FILED

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

TAMPA BAY ACQUISITIONS, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

1 Progress Plaza, Suite 1210

St. Petersburg, FL 33731

**Mailing Address:**

1151 Airport Road, Suite 2

Minden, Nevada 89423

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature**

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

Karen Maller

Name

1 Progress Plaza, Suite 1210

Florida street address (P.O. Box **NOT** acceptable)

St. Petersburg

FLORIDA 33731

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, Florida Statutes..*



Registered Agent's Signature

**FILED**  
03 NOV 19 PM 1:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Chris Morales

1 Progress Plaza, Suite 1210

St. Petersburg, FL 33731

MGRM

Jeff Anastas

1 Progress Plaza, Suite 1210

St. Petersburg, FL 33731

(Use attachment if necessary)

STATE OF FLORIDA  
TALLAHASSEE

03 NOV 19 PM 1:47

FILED

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**



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.)

Cammie Warburton, Organizer

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)