

L03000050148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

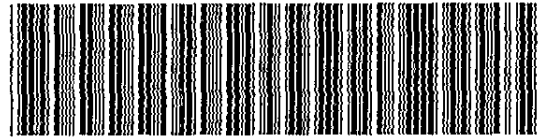
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

385-6735

(City, State, Zip)

(Phone #)

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EFFECTIVE 1/1/04

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. STONIS WAY LLC
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF ORGANIZATION
OF
STOWS WAY, LLC**

03 DEC -4 11 08:11/8
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, acting as a Managing Member of Stows Way, LLC, a Limited Liability Company under the Florida Limited Liability Company Act, adopts the following Articles of Organization for such company:

ARTICLE I - NAME: The name of this Limited Liability Company is Stows Way, LLC.

ARTICLE II - DURATION: The period of duration of this Limited Liability Company shall be perpetual from the date of the issuance of a Certificate of Organization by the State of Florida.

ARTICLE III - PRINCIPAL OFFICE: The address of the principal office of this Limited Liability Company is 6722 SE 220 Terrace, Hawthorne, Florida 32640, and the mailing address is P.O. Box 2081, Hawthorne, Florida 32640.

ARTICLE IV - REGISTERED AGENT AND OFFICE: The name of the initial registered agent within Florida is THEODORE D. BRISTOW, and the street address is 6722 SE 220 Terrace, Hawthorne, Florida 32640.

ARTICLE V - MEMBERS: This Limited Liability Company has one (1) member who is the Managing Member and whose name and address is:

THEODORE D. BRISTOW

6722 SE 220 Terrace
Hawthorne, Florida 32640

No additional members shall be admitted unless all members, (including any additional members other than original members) shall unanimously agree, and on such terms and conditions as shall be agreed unanimously. The death, retirement, resignation, expulsion, bankruptcy or dissolution of any member, or the occurrence of any event which terminates the continued membership of a member of this Limited Liability Company, shall terminate this Company, unless the remaining members shall unanimously agree to continue the business of this Company, in which event, this Company shall not so terminate.

ARTICLE VI - MANAGEMENT: The management of the Company is reserved to the members of the Company, in proportion to their contributions to the capital of the Limited Liability Company. The power to adopt, alter, amend or repeal the regulations of this Limited Liability Company shall be vested in the members of the Company. The name and address of the Managing Member is:

THEODORE D. BRISTOW

6722 SE 220 Terrace
Hawthorne, Florida 32640

ARTICLE VII - EFFECTIVE DATE: The effective date of this Limited Liability Company shall be January 1, 2004.

IN WITNESS WHEREOF, the undersigned Managing Member has executed these Articles of Organization on this 1 day of December, 2003.

(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.)

By: 

THEODORE D. BRISTOW
Managing Member

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.

(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.)

By: 

THEODORE D. BRISTOW
Managing Member

STATE OF FLORIDA)
COUNTY OF MARION)

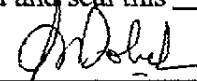
The foregoing instrument was acknowledged before me this 1st day of December, 2003, by Theodore D. Bristow (as Managing Member) who is personally known to me or who produced Pa. D/L as identification and who did/did not take an oath.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1st day of December, 2003.

My Commission Expires:



Sheryl L. Dobek
MY COMMISSION # DD165414 EXPIRES
January 23, 2007
BONDED THRU TROY CAN INSURANCE, INC.


NOTARY PUBLIC - FLORIDA