

L03000052089

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

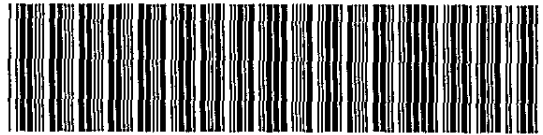
BALTIMORE ENTERPRISE, L.L.C.  
DBA Get and Go  
1308-1 UNIVERSITY Blvd North  
JACKSONVILLE, FL 32211

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000025123250

12/04/03--01021--013 \*\*160.00

W212/12

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
03 DEC -4 AM 9:47

4p

**COVER LETTER FOR: Baltimore Enterprise LTC.**

**TO: The Florida Department of State**

The managing member is Hillary T. Baltimore, who's daytime phone number is: ( 904 ) 716 - 7749 or ( 904 ) 722 - 0002.

Enclosed is a check for \$160,00 for filling fee and article of the Organization.

For any further information, please feel free to call me.

Sincerely,

*Hillary T. Baltimore*

FILED STATE  
TREASURY OF CORPORATIONS  
03 DEC -4 AM 9:47

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BALTIMORE ENTERPRISES, L.L.C

**ARTICLE II - Address:**

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

**Principal Office Address:**

1308 - 1 UNIVERSITY BLVD NORTH

32211  
JACKSONVILLE, FL. ~~32225~~ 470

**Mailing Address:**

1308-1 UNIVERSITY BLVD NORTH

JACKSONVILLE, FL. 32211

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

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

LATASHA WILLIAMS

Name

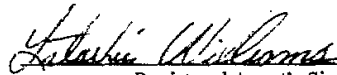
2164 SUNSET RIVER DR

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

JACKSONVILLE, FLORIDA 32225

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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 DEC-4 AM 9:47

**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

HILLARY T, BALTIMORE

2164 SUNSET RIVER DR

JACKSONVILLE FL. 32225

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

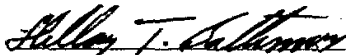
\_\_\_\_\_

(Use attachment if necessary)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 DEC -4 AM 9:47

**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.)

HILLARY T BALTIMORE

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)