## L040000/3389

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phone #	<del>(</del> )
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



600028140556

02/10/04--01008--009 \*\*125.00

2004 FEB 10 PM 12: 46
2004 FEB 10 PM 12: 46
2004 FEB 10 PM 12: 46

## TRANSMITTAL LETTER

	gistration Section vision of Corporations	
~	vision of corporations	
SUBJECT:	Sunshine Marketing Services, L.L.C.	
	(Name of Limited Liability Company)	_
The enclose	ed Articles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following:	
	Henry M. Stein	AMILE OF SEE. FLORIDA
	(Name of Person)	E TA A
		19 B 1
	Stein and Stein, P.C.	至600
	(Firm/Company)	
2826	6 South Carriage Lane, Suite 100	23.5
	(Address)	
		75
	Mesa, Arizona 85202	
	(City/State and Zip Code)	_
		,
For further i	information concerning this matter, please call:	
Henry M. S	Stein at (_480) 820-1421	
	(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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TALANASSE, ALANA	CHO ME TON
·	40

The name of the Limited Liability Company is:

Sunshine Marketing Services, 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:	Mailing Address:
1019 Symphony Isles Boulevard	P.O. Box 3509
Apollo Beach, Florida 33572	Apollo Beach, Florida 33572

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Richard Ogrodowski	
	Name
1019 Symphony Isles B	oulevard
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
Apollo Beach,	FLORIDA 33572
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

Page 1 of 2 (CONTINUED)

Title:	Name and Address:	
"MGR" = Manager	Traine and Address.	~
"MGRM" = Managing Member	ALC OF	ò
MGRM	Richard Ogrodowski  1019 Symphony Isles Boulevard Apollo Beach, Florida 33572  Robert Straub	
·	1019 Symphony Isles Boulevard	-
	Apollo Beach, Florida 33572	ο.
MGRM	Robert Straub	
· · · · · · · · · · · · · · · · · · ·	1445 Jumana Loop	-
	Apollo Beach, Florida 33572	
Use attachment if necessary) —		-
REQUIRED SIGNATURE:	t be added if an effective date is requested.	-
Signature of a member or	an authorized representative of a member.	
(In accordance with section of this document constitutes that the facts stated herein a	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury re true.)	
Richard Ogrodowski, me	mhau	

Page 2 of 2

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)