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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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04 FEB 23 PM 2:36

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ANS SWAD, 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:

Richard DeCook

(Name of Person)

Advertising Network Solutions, Inc.

(Firm/Company)

18159 S. E. Ridgeview Dr.

(Address)

Tequesta, FL 33469

(City/State and Zip Code)

For further information concerning this matter, please call:

Richard DeCook

(Name of Person)

at (561) 748 6857

(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**

ARTICLE I - Name:

The name of the Limited Liability Company is:

ANS SWAD, LLC

ARTICLE II - Address:

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

Principal Office Address:

5205 West 65th Street

Bedford Park, IL 60638

Mailing Address:

1520 Goodyear Dr.

Ste A

El Paso, TX 79936

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

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

Richard C. DeCook

Name

18159 S. E. Ridgeview Dr.

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

Tequesta

FLORIDA 33469

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

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TALLAHASSEE, FLORIDA

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

"MGRM" = Managing Member

Name and Address:

MGRM

Don G. Harvey

1520 Goodyear Dr.- Ste. A

El Paso, TX 79936

MGRM

Richard C. DeCook

18159 S. E. Ridgeview Dr.

Tequesta, FL 33469

(Use attachment if necessary)

ARTICLE V-EFFECTIVE DATE- MARCH 1, 2004

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

REQUIRED SIGNATURE:

Richard C. DeAngelis
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.)

Richard C. DeCook

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)