

LO4000024403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

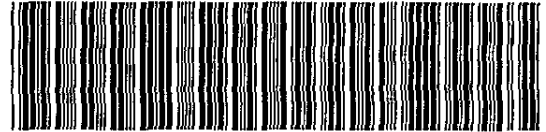
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04 MAR 22 AM 10:38

THOMAS C. RANew, JR.

Attorney at Law

Mailing Address:

Thomas C. Ranew, Jr., P. A.

Post Office Box 956

Silver Springs, Florida 34489-0956

Physical Address: 3711 Northeast 42nd Lane
Ocala, Florida 34479

Telephone: (352) 840-5914

Facsimile: (352) 622-2569

E-Mail: Tom@harvestinternational.org

March 16, 2004

**Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314**

Re: MYOTHERJOB, LLC

Gentlemen:

Enclosed please find Articles of Organization for MYOTHERJOB, LLC and my check in the amount of \$125.00 for filing.

Please provide me with a letter of acknowledgement of filing .

Very truly yours,



Tom Ranew

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

MYOTHERJOB, LLC

ARTICLE II - Address:

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

Principal Office Address:

3711 NE 42nd Lane, Ocala, FL 34479

Mailing Address:

P. O. Box 956, Silver Springs, FL 34489

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

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

Thomas C. Ranew, Jr.

Name

3711 NE 42nd Lane

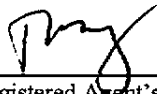
Florida street address (P.O. Box **NOT** acceptable)

Ocala

FLORIDA 34479

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

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

Thomas C. Ranew, Jr

3711 NE 42nd Lane

Ocala, FL 34479

(Use attachment if necessary)

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.)

Thomas C. Ranew, Jr.

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)