

L040000 34216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

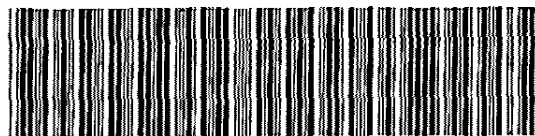
(Document Number)

Certified Copies 1

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200035344252

05/05/04--01045--019 **155.00

DIVISION OF CORPORATIONS

04 MAY -5 PM 2:13

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 MAY -5 PM 2:18

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHORT CUTS, L.L.C.
(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:

KATHERINE FENDRICH
(Name of Person)

SHORT CUTS, L.L.C.
(Firm/Company)

5071 MEADOWLARK LANE
(Address)

TALLAHASSEE, FLORIDA 32303
(City/State and Zip Code)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 MAY -5 PM 2:18

For further information concerning this matter, please call:

KATHERINE FENDRICH at (850) 508-2726
(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**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 MAY -5 PM 2:18

ARTICLE I - Name:

The name of the Limited Liability Company is:

SHORT CUTS, 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:

5071 MEADOWLARK LANE

TALLAHASSEE, FLORIDA 32303

Mailing Address:

5071 MEADOWLARK LANE

TALLAHASSEE, FLORIDA 32303

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

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

KATHERINE FENDRICH

Name

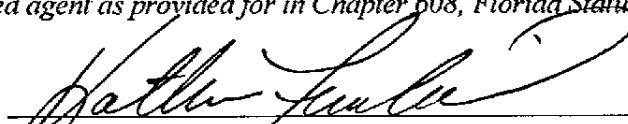
5071 MEADOWLARK LANE

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

TALLAHASSEE, FLORIDA 32303

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

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:

"MGR"

KATHERINE FENDRICH

5071 MEADOWLARK LANE

TALLAHASSEE, FLORIDA 32303

04 MAY -5 PM 2:18

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

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

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.)

KATHERINE FENDRICH

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)

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY
(ATTACHMENT)**

SHORT CUTS, L.L.C

ARTICLE V – EFFECTIVE DATE:

The effective date of this Limited Liability Company is to be MAY 1, 2004.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 MAY -5 PM 2:18