

W04000038312

00855-02827-001076-02943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

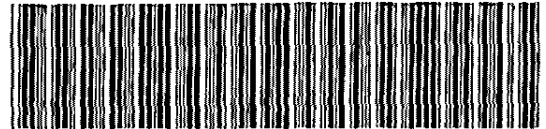
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Special Instructions to Filing Officer:

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W04-16639



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04/23/04--01044--002 \*\*100.00

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05/18/04--01062--003 \*\*25.00

05 MAY 12 11:10:30

FILED

## TRANSMITTAL LETTER

ATX1

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CORR-PAK & DISPLAY, 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:

LEON L TALPALAR

(Name of Person)

CORR-PAK & DISPLAY, LLC

(Firm/Company)

917 SUNNYDELL DRIVE

(Address)

ORLANDO, FL 32818

(City/State and Zip Code)

For further information concerning this matter, please call:

LEON L TALPALAR

(Name of Person)

at 407-948-3713

(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 3, 2004

LEON L. TALPALAR  
CORR-PAK & DISPLAY, LLC  
917 SUNNYDELL DRIVE  
ORLANDO, FL 32818

SUBJECT: CORR-PAK & DISPLAY, LLC  
Ref. Number: W04000016639

We have received your document for CORR-PAK & DISPLAY, LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$25.00.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges  
Document Specialist

Letter Number: 104A00029116

CORR-PAK & DISPLAY, LLC

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

ATX1

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

CORR-PAK & DISPLAY, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

CORR-PAK & DISPLAY, LLC

917 SUNNYDELL DRIVE

ORLANDO, FL 32818

**Mailing Address:**

CORR-PAK & DISPLAY, LLC

917 SUNNYDELL DRIVE

ORLANDO, FL 32818

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

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

LEON L TALPALAR

Name

917 SUNNYDELL DRIVE

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

ORLANDO

FLORIDA 32818

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  
04 MAY 10 AM 10:30  
TALPALAR, LEON L.

CORR-PAK & DISPLAY, LLC

**ARTICLE IV- Manager(s) or Managing Member(s):**

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

ATX1

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

LEON L TALPALAR

917 SUNNYDELL DRIVE

ORLANDO, FL 32818

(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.)

LEON L TALPALAR

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)