# L04000042171

. (Requestor's Name)	_
(Address)	
(Address)	_
(City/State/Zip/Phone #)	******
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	<u> </u>
Special Instructions to Filing Officer:	
	ĺ

Office Use Only



600036912706

TALL AND OF STATE





ACCOUNT NO. : 072100000032

REFERENCE: 717361 4355221

AUTHORIZATION :

COST LIMIT: \$ 155. Chica Type

ORDER DATE : June 4, 2004

ORDER TIME : 11:16 AM

ORDER NO. : 717361-010

CUSTOMER NO: 4355221

CUSTOMER: Bruce D. Barkett, Esq

Collins Brown Caldwell Barkett & Garavaglia 756 Beachland Boulevard

Vero Beach, FL 32963

DOMESTIC FILING

NAME: REFLECTIONS FINANCE CO., LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX \_\_ CERTIFIED COPY

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS:

#### ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is as follows:

### Reflections Finance Co., LLC

#### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Compa

1623 US Hwy 1 - Unit B-1 Sebastian, Florida 32958

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

The name and Florida street address of the Registered Agent are as follows:

Bruce D. Barkett, Esq. Collins, Brown, Caldwell, Barkett & Garavaglia, Chartered 756 Beachland Boulevard Vero Beach, FL 32963

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, F.S.

Bruce D. Barkett, Resident Agent

# ARTICLE IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of 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.)

Bruce D. Barkett, authorized representative of a member

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)