

L04000046226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

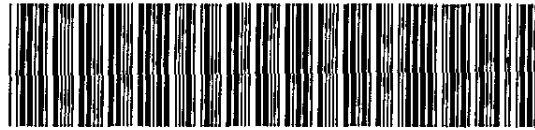
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500038004505

06/18/04--01040---024 **160.00

FILED
2004 JUN 18 PM 12:49
TALLAHASSEE, FLORIDA

J. BRYAN JUN 21 2004

BARON & MOORE, P.A.

ATTORNEYS AT LAW

MICHAEL L. MOORE

ARTHUR BARON *†

FLORIDA BOARD CERTIFIED
CIVIL TRIAL LAWYER

* ALSO ADMITTED IN MICHIGAN
† OF COUNSEL

640 N. HILLSIDE AVENUE
ORLANDO, FLORIDA 32803
OFFICE: (407) 894-6447
FAX: (407) 894-0332
WWW.BARONANDMOORE.COM
PLEASE REPLY TO ORLANDO OFFICE

MICHIGAN OFFICE
1101 11TH AVENUE
SUITE 4
MENOMINEE, MI 49858
OFFICE: (906) 863-3600
FAX: (906) 863-3609

June 17, 2004

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Beary Smart Kids Academy, LLC
Articles of Organization

Dear Sir/Madam:

Please find enclosed two (2) original executed Articles of Organization for Beary Smart Kids Academy, LLC for filing. Also enclosed is a check in the amount of \$160.00 as payment of the filing fee.

Please return a certified copy of the Articles to the address above, and feel free to contact me if you have any questions.

Sincerely,



Michael L. Moore

MLM:mkr
Enclosures (3)

FILED
2004 JUN 18 PM 12:49
TALLAHASSEE, FLORIDA

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

FILED
2004 JUN 18 PM 12:49
HALLANDALE, FLORIDA

ARTICLE I – Name:

The name of the Limited Liability Company is:

Beary Smart Kids Academy, LLC

ARTICLE II – Address:

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

Principal Office Address

504 Saint Pete Drive
West Oldsmar, Florida 34677

Mailing Address

504 Saint Pete Drive
West Oldsmar, Florida 34677

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature

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

Michael L. Moore, Esquire
640 North Hillside Avenue
Orlando, Florida 32803

Having been named as registered agent and to accept service of process for 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.

Michael Moore
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

CO-MGRM

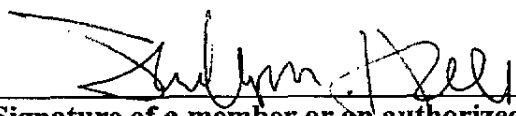
Name and Address:

Shelby Hill
504 Saint Pete Drive
West Oldsmar, Florida 34677

CO-MGRM

Laura Delgado
504 Saint Pete Drive
West Oldsmar, Florida 34677

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

Shelby Hill

Typed or printed name of signee

Filing fees enclosed

\$100.00 Filing Fee for Articles of Organization

\$25.00 Designation of Registered Agent

\$30.00 Certified Copy

\$ 5.00 Certificate of Status

FILED
2004 JUN 18 PM 12:49
CLERK OF CIRCUIT COURT
TALLAHASSEE, FLORIDA