

W04000046316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

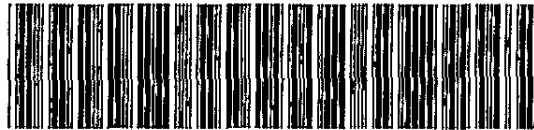
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/24/04--01041--003 **160.00

~~W04-20406~~
W04-46316
JR

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: my Carbo Coach
(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:

Sara Riha
(Name of Person)

my Carbo Coach
(Firm/Company)

P.O. Box 48082
(Address)

Tampa, FL 33647
(City/State and Zip Code)

For further information concerning this matter, please call:

Sara Riha at (847) 381-1118
(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

FILED
JAN 11 1999
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 28, 2004

SARA RIHA
P.O. BOX 48082
TAMPA, FL 33647

SUBJECT: MY CARBO COACH
Ref. Number: W04000020906

We have received your document for MY CARBO COACH and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with 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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 604A00037468

FILED
JUL 1 2004
TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

my Carbo Coach 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:

18105 TURTLE BEACH WAY
~~18055 Sanctuary Cove Drive~~

~~Suite 1413~~

TAMPA, FL 33647
~~Temple Terrace, FL 33637~~

Mailing Address:

18105 TURTLE BEACH WAY
~~P.O. Box 48082~~

~~Tampa, FL 33647~~

TAMPA, FL 33647

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

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

Patrick Riha

Name

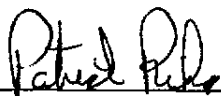
18105 TURTLE BEACH WAY
~~18055 Sanctuary Cove Drive Suite 1413~~

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

TAMPA 33647
~~Temple Terrace,~~ ~~FLORIDA 33637~~

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
JAN 11 2010
TAMPA, 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

Sara Riha

19055 Sanctuary Cove Drive Suite 1413 18105 TURTLE BEACH WAY
Temple Terrace, FL 33637 TAMPA, FL 33647

MGRM

Patrick Riha

19055 Sanctuary Cove Drive Suite 1413
Temple Terrace, FL 33637

18105 TURTLE BEACH WAY
TAMPA, FL 33647

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

Patrick Riha

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.)

Patrick Riha

Typed or printed name of signer

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)