

L04000053553
FILED

2004 JUL 15 A 10:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



000038372000

07/15/04--01022--012 **125.00

(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:

AL I

Office Use Only

TRANSMITTAL LETTER

FILED

TO: Registration Section
Division of Corporations

2004 JUL 15 A 10:14

SUBJECT: IMPERIAL MORTUARY LLC
(Name of Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joshua RUDIN

(Name of Person)

IMPERIAL MORTUARY LLC

(Firm/Company)

6120 E Vernon Ave

(Address)

Scottsdale, AZ 85257

(City/State and Zip Code)

For further information concerning this matter, please call:

Joshua RUDIN

(Name of Person)

at (602) 369-6487

(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

2004 JUL 15 A 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

IMPERIAL MORTUARY LLC

ARTICLE II - Address:

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

Principal Office Address:

1402 Freemont St, S
Gulfport FL 33707

Mailing Address:

1402 Freemont St S
Gulfport FL 33707

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

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

Joshua Rubin

Name

1402 Freemont St S Gulfport FL 33707

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

Gulfport FL FLORIDA 33707

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..

Joshua Rubin

Registered Agent's Signature

FILED

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

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

2004 JUL 15 A 10: 14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Joshua Rudin
6120 E. Vernon Ave
Scottsdale, AZ 85257

MGRM

Theodore Currie
8701 Blind Pass Rd 206 B
St. Pete Beach FL 33706

(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.)

JOSHUA RUDIN
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)