

L04000056354

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2004 JUL 29 PM 4:07  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN JUL 29 2004

104-27699  
J. BRYAN JUL 29 2004

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HANG TIME ADVERTISING 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:

JOHN PEASE  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

334 W COMANCHE AVE  
(Address)

TAMPA, FL 33604  
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN PEASE at ( 813 ) 231-3674  
(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

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2004 JUL 29 PM 4:07  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

July 20, 2004

JOHN PEASE  
HANG TIME ADVERTISING LLC  
334 W COMANCHE AVE.  
TAMPA, FL 33604

SUBJECT: HANG TIME ADVERTISING LLC  
Ref. Number: W04000027699

We have received your document for HANG TIME ADVERTISING 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:

There is a balance due of \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Document Specialist

Letter Number: 004A00045878

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2004 JUL 29 PM 4:07  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

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2004 JUL 29 PM 4:07  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

HANG TIME ADVERTISING LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

334 W COMANCHE AVE

TAMPA, FL 33604

**Mailing Address:**

334 W COMANCHE AVE

TAMPA FL 33604

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

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

JOHN PEASE

Name

334 W COMANCHE AVE

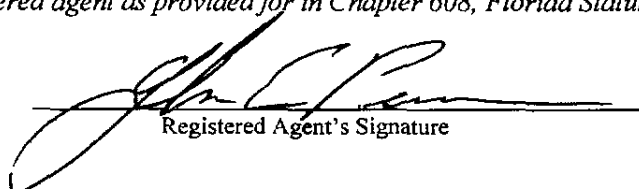
Florida street address (P.O. Box **NOT** acceptable)

TAMPA

FLORIDA 33604

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

**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

JOHN PEASE

334 W COMANCHE AVE

TAMPA, FL 33604

MGR

KENNETH TARRIDE

334 W COMANCHE AVE

TAMPA, FL 33604

(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.)

  
\_\_\_\_\_  
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)**

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