

L040000 73511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

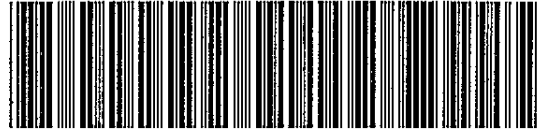
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300041346613

10/08/04--01026--015 **125.00

FILED
04 OCT - 8 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LAW OFFICES

FRANK J. YONG, P.A.

4570 ST. JOHNS AVENUE, SUITE 1A
JACKSONVILLE, FLORIDA 32210

FRANK J. YONG
KATHLEEN M. SMITH, Paralegal

October 5, 2004

TELEPHONE
(904) 381-1901
TELECOPIER
(904) 381-1970
E-MAIL
fjyong@
yahoo.com

Divisions of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: Safety First, LLC

Dear Sir/Madam:

Enclosed for filing are one original and one copy of the Articles of Organization for the above-named limited liability company, together with a Certificate Designating Registered Office/Agent and our firm check in the amount of \$125.00 in payment of your filing fee. Please return one stamped copy of each of the Articles of Organization to me in the envelope provided.

Please do not hesitate to contact me should you have questions regarding this matter.

Very truly yours,

Kathleen M. Smith

Kathleen M. Smith, CLAS
Certified Legal Assistant

/kms
Enclosures

FILED
04 OCT - 8 AM 10:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION
FOR
SAFETY FIRST, LLC**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Safety First, LLC

ARTICLE II - Address:

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

2810 Hilltop Road
St. Augustine, Florida 32086

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

From the date of filing this company shall exist perpetually. Its existence shall commence on the date these Articles are executed and acknowledged, except that if they are not filed by the Department of State of the State of Florida within five days, exclusive of legal holidays, after they are executed and acknowledged, corporate existence shall commence upon filing by the Department of State.

ARTICLE IV - Management:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Shelli Schmid
2810 Hilltop Road
St. Augustine, Florida 32086

FILED
04 OCT - 8 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

The unanimous consent of all the Members.

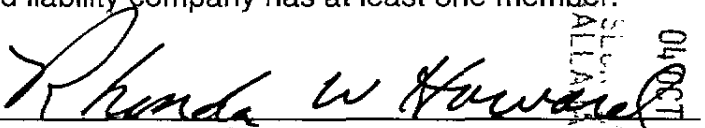
ARTICLE VI - Members Rights to Continue Business:

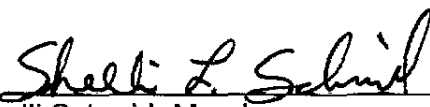
The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company shall be:

If all the Members unanimously consent, the business shall continue.

ARTICLE VII - Number of Members:

The undersigned member or authorized representative of a member of Safety First, LLC certifies that the above-named limited liability company has at least one member.


Rhonda Howard, Member


Shelli Schmid, Member

04 OCT -8 AM 10:43
FILED
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

(In accordance with §608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**CERTIFICATE DESIGNATING REGISTERED OFFICE AND REGISTERED
AGENT FOR THE SERVICE OF PROCESS WITHIN FLORIDA**

In compliance with Sections 608.415 or 608.507, Florida Statutes, the undersigned limited liability company submits the following statement to designate a registered office and registered agent in the State of Florida:

1. The name of the Limited Liability Company is Safety First, LLC.
2. The name and the Florida street address of the registered agent are:

Shelli Schmid
2810 Hilltop Road
St. Augustine, Florida 32086

Having been named as registered agent 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.



Shelli Schmid, Registered Agent

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

04 OCT -8 AM 10:43

FILED