

L 04000073574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

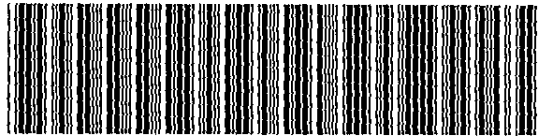
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100041484571

10/11/04--01004--020 \*\*155.00

RECEIVED  
04 OCT 11 AM 11:47  
DIVISION OF CORPORATION

FILED  
04 OCT 11 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten signature*

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Duranos LLC

FILED  
04 OCT 11 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☒ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

Signature \_\_\_\_\_

Requested by: WC 10/11 11:00  
Name Date Time

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CORPORATION

FILED  
04 OCT 11 PM 2:12  
SECURITY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Corporation is:

**OURANOS LLC**

ARTICLE II - Address:

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

Principal Office Address:

45 Cochise Court  
Palm Coast, FL 32137

Mailing Address:

45 Cochise Court  
Palm Coast, FL 32137

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

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

CLARENCE W. BRODNAX

(Name)

45 Cochise Court

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

Palm Coast, FL 32137

(City, State and Zip Code)

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, F.S.



Clarence W. Broadnax

(CONTINUED)

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

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

<u>MGRM</u>	50%	<u>Clarence W. Brodnax</u> <u>45 Cochise Ct., Palm Coast, FL 32137</u>
<u>Member</u>	20%	<u>Rhenda R. Brodnax</u> <u>45 Cochise Ct., Palm Coast, FL 32137</u>
<u>Member</u>	10%	<u>Carl D. Brodnax</u> <u>291 Chestnut Hill Ave., Norwalk, CT 06851</u>
<u>Member</u>	10%	<u>Cheryl Denise Brodnax</u> <u>26 East 65<sup>th</sup> St., Savannah, GA 31408</u>
<u>Member</u>	10%	<u>Chanda Dee Brodnax</u> <u>11 Split Road, Norwalk, CT 06850</u>

ARTICLE V - Effective Date:

The effective date is October 15, 2004.

REQUIRED SIGNATURE:

  
CLARENCE W. BRODNAX

(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.)

Filing Fees:

\$100 Filing Fee for Articles of Organization

\$ 25 Designation of Registered Agent

\$ 30 Certified Copy (optional)

\$ 5 Certificate of Status (optional)