

L05000013941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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enitia corporation

p.o. box 495

dexter, mi 48130

February 1, 2005

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Poe LLC

Dear Sir or Madam:

Enitia Corporation has been authorized by Stacey Polcik to file the enclosed Articles for Poe LLC. Enitia Corporation is acting only as the Incorporator.

If you need any additional information, you can reach us at

Enitia Corporation
P.O. Box 495
Dexter, MI 48130

1-877-281-6495 ext 1096 (toll free)
edstahlin@enitia.com

We have enclosed an additional \$5.00 for one "Certificate of Status". For your convenience, I have enclosed a self-addressed envelope.

Thank you,

Ed Stahlin
Enitia Corporation

RECEIVED
2005 FEB -1 PM 2:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Poe LLC

ARTICLE II - Address:

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

242 1/2 Taylor Ave. S.
St. Petersburg, FL 33705

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

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

Stacey Polcik

Name

242 1/2 Taylor Ave. S.

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

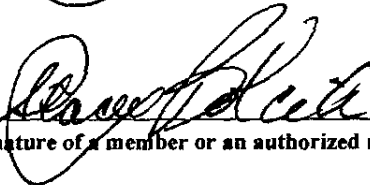
St. Petersburg, FL 33705

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, F.S.



Registered Agent's 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.)

Stacey Polcik

Typed or printed name of signer

STACKEY POLCIK

2008-07-20 14:19

FILED