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TRANSMITTAL LETTER

TO: Registration Se Division of Co			
SUBJECT: Simply E		d Liability Company)	
	f Organization and fee(s) are so		
_	ondence concerning this matte	r to the following:	
Kimberly	Backovsky	Name of Person)	<u></u>
		•	
Simply Exhibits LLC			
Simply Exhibits EEO		Firm/Company)	
1171 Station	nside Drive		
•		(Address)	
Oakla	and FL 34787	State and Zip Code)	
	(Cuy)	State and Elp Code)	
For further information	concerning this matter, please	call:	
Kimberly Backovsky		at (_407) 620-6913	
(Name	of Person)	(Area Code & Daytime Te	lephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is toglosed)
Regist Divisio 409 E.	ET ADDRESS: ration Section on of Corporations Gaines Street assee, Florida 32399	MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection Propractions Propractions

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:				
Simply Exhibits LLC				
ADTICLE II Address.				
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited L	iability Company is:		
Principal Office Address:	Mailing Address:			
1171 Stationside Drive	1171 Stationside Drive			
Oakland FL 34787	Oakland FL 34787			
ARTICLE III - Registered Agent, Regi		s Signature:		
Kimberly Backovsky	Name			
	Name			
1171 Stationside Drive				
	reet address (P.O. Box NOT acceptable)			
Oakland City.	State, and Zip			
Having been named as registered agent of liability company at the place designal registered agent and agree to act in this constatutes relating to the proper and compaccept the obligations of my position of Registered	ted in this certificate, I hereby accept that apacity. I further agree to comply with	he appointment as h the provisions of all m familiar with and		
(CO	NTINUED)	37 TE 70		

Page 1 of 2

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	Name and Address.
"MGRM" = Managing Member	
MGRM	Kimberly Backovsky
	1171 Stationside Drive
	Oakland FL 34787
MGRM	John Backovsky
	1171 Stationside Drive
	Oakland FL 34787
MGRM	Dolores Backovsky
	1171 Stationside Drive
	Oakland FL 34787
(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.)

A BACKOVSKY
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)