

LOS 0000 40720

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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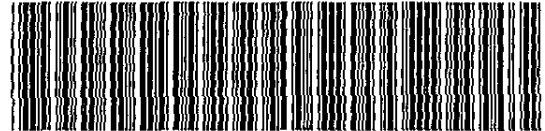
(Business Entity Name)

(Document Number)

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LOS-40720
OK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pegalyn Publishing, 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:

Peggy L. Ekberg

(Name of Person)

(Firm/Company)

11814 Keats Dr.

(Address)

Leesburg, FL 34788

(City/State and Zip Code)

For further information concerning this matter, please call:

Peggy L. Ekberg

(Name of Person)

at (352) 357-5721

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$130.00 Filing Fee &
Certificate of Status



\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)



\$160.00 Filing Fee &
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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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CLERK OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Pegalyn Publishing, LLC

ARTICLE II - Address:

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

Principal Office Address:

11814 Keats Dr.
Leesburg, FL 34788

Mailing Address:


11814 Keats Dr.
Leesburg, FL 34788

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

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

Peggy L. Ekberg
Name
11814 Keats Dr.
Florida street address (P.O. Box NOT acceptable)
Leesburg, FL 34788
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

(CONTINUED)

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

"MGRM" = Managing Member

Peggy L. Ekberg

11814 Keats Dr.

Leesburg, FL 34788

MGR

REQUIRED SIGNATURE:

James H. Fisher
Signature of Officer or authorized person

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.)

Peggy L. Ekberg

Typed or printed name of signee

\$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA

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