

LD5000053068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

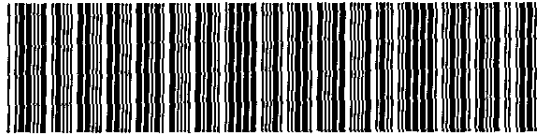
Certified Copies 1

Certificates of Status 1

Special Instructions to Filing Officer:

walk-in

Office Use Only



900054731539

05/31/05--01001--007 **160.00

FILED

05 MAY 27 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

05 MAY 27 PM 2:28

DEPARTMENT OF REVENUE
DIVISION OF CERTIFICATIONS
TALLAHASSEE, FLORIDA

5/27

LLC Filing Letter

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

Date: May 25, 2005

LLC Filings Office:

I enclose an original and ___ copies of the proposed Articles of Organization of VolleyballGirl, "LLC", a proposed domestic limited liability company.

Please file the Articles of Organization and return a certificate of formation, file-stamped copy of the original document or other receipt, acknowledgment or proof of filing to me at the address shown below my signature.

Payment for the required fees is enclosed.

Sincerely,

Signed: _____

Jenny W. Gibson
Jenny W. Gibson
2794 Ravines Road
Middleburg, Florida 32068
Telephone: 904-449-4086

FILED
05 MAY 27 PM 2:40
TALLAHASSEE, FLORIDA

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

Article I - Name:

The name of the Limited Liability Company is:

VolleyballGirl, "LLC"

Article II - Address:

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

2794 Ravines Road, Middleburg, Florida 32068

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

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

Jenny W. Gibson

Name

2794 Ravines Road, Middleburg, Florida 32068

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

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.

Jenny W. Gibson

Registered Agent's Signature

FILED
05 MAY 27 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article IV - Manager(s) or Managing Members(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Jenny W. Gibson

2794 Ravines Road, Middleburg, Florida 32068

MGRM

Rachel Lynn Gibson

2794 Ravines Road, Middleburg, Florida 32068

MGRM

Jordan Elizabeth Gibson

2794 Ravines Road, Middleburg, Florida 32068

MGRM

Walter O. Gibson

2794 Ravines Road, Middleburg, Florida 32068

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Jenny W. Gibson
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.)

Jenny W. Gibson
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 MAY 27 PM 2:40

FILED