

U5000077117

00789-00594-00671

form for LC

(Requestor's Name)

1937 E. Atlantic Blvd.

(Address)

Suite 10

(Address)

Pompano Bch., FL 33060

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

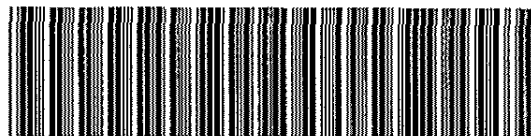
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

8/4

FL LC

Office Use Only



000057583390

07/21/05--01031--014 \*\*125.00

M. HODGES

05/10/06 PM 04:11

W05-35460

July 14, 2005

***Via Regular Mail***

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

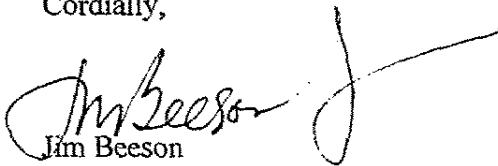
Re: Filing of Articles of Organization and Designation of Registered Agent:  
VanBee LLC

To whom it may concern:

Enclosed please find a check issued in the amount of \$125.00, made payable to the Department of State, for filing of Articles of Organization and Designation of Registered Agent regarding the above referenced corporate entity, the original of which is also included.

Please do not hesitate to contact the undersigned should you require any additional information.

Cordially,

  
Jim Beeson

Encl.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

July 26, 2005

JIM BEESON  
1937 E. ATLANTIC BLVD., SUITE 12  
POMPANO BEACH, FL 33060

SUBJECT: VANBEE LLC  
Ref. Number: W05000035460

We have received your document for VANBEE LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached application to file for a Limited Liability Company, only a cover letter and check were received.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges  
Document Specialist

Letter Number: 805A00048658

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** VanBee 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:

Jim Beeson, Jr.  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

1937 E. Atlantic Blvd., Suite 9  
(Address)

Pompano Beach, FL 33060  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jim Beeson, Jr. at ( 954 ) 946-4007  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

VanBee LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

1937 E. Atlantic Blvd., Suite 9  
Pompano Beach, FL 33060

**Mailing Address:**

1937 E. Atlantic Blvd., Suite 9  
Pompano Beach, FL 33060

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

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

Jim Beeson, Jr.

Name

1937 E. Atlantic Blvd., Suite 9

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

Pompano Beach, FL 33060

FL

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)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR \_\_\_\_\_

James M. Beeson, Jr.

1937 East Atlantic Blvd.; Suite 9

Pompano Beach, FL 33060

MGR \_\_\_\_\_

Michael J. Van Horn

PO Box 300

Kresgeville, PA 18333

\_\_\_\_\_

\_\_\_\_\_

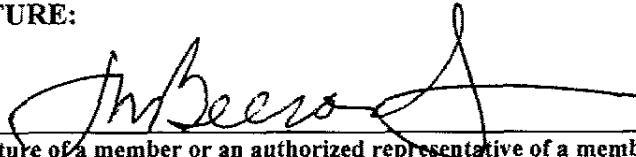
\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

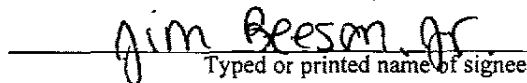
**NOTE: An additional article must be added if an effective date is requested.**

**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.)

  
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)**