

L05000112732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

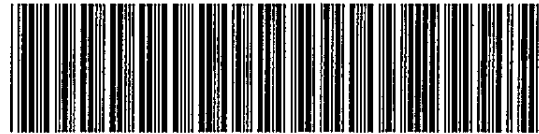
Special Instructions to Filing Officer:

(Signature)
11/22

11/4/05

~~W05 50/24~~

Office Use Only



200060901852

EFFECTIVE DATE

12/01/05

11/04/05--01029--002 **125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 NOV 21 PM 2:07

APPROVED
AND
FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRITE STAR, 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:

ATTILA TOTH
(Name of Person)

(Firm/Company)

11051 SKYLARK DRIVE
(Address)

JACKSONVILLE FL 32257
(City/State and Zip Code)

For further information concerning this matter, please call:

ATTILA TOTH at (904) 268-2730
(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 &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|---|---|

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 9, 2005

ATTILA TOTH
11051 SKYLARK DRIVE
JACKSONVILLE, FL 32257

SUBJECT: BRITE STAR, LLC
Ref. Number: W05000050429

We have received your document for BRITE STAR, 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):

The registered agent must sign accepting the designation.

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) 245-6853.

Leslie Sellers
Document Specialist

Letter Number: 705A00066898

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE
12/07/05

BRITE STAR, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

11051 SKYLARK DRIVE
JACKSONVILLE FL 32257

Mailing Address:

11051 SKYLARK DRIVE
JACKSONVILLE FL 32257

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

ATTILA TOTTH

Name

11051 SKYLARK DRIVE

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

JACKSONVILLE FL 32257

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 NOV 21 PM 2:07

APPROVED
AND
FILED

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..

Attila Totth

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

ATTILA TOTTH

11051 SKYLARK DRIVE

JACKSONVILLE FL 32257

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 12/01/05. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

ATTILA TOTTH

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 NOV 21 PM 2:07

APPROVED
AND
FILED

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)