

L06000021103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

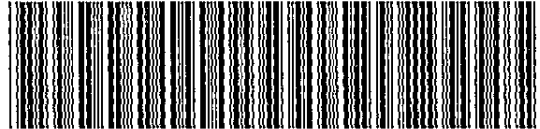
(Document Number)

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

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2006 FEB 27 PM 4:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 FEB 27 PM 3:07

DIVISION OF REGISTRATION



**UCC Filing & Search Services, Inc.**  
1574 Village Square Boulevard, Suite 100  
Tallahassee, Florida 32309  
(850) 681-6528

**HOLD**  
FOR PICKUP BY  
UCC SERVICES  
OFFICE USE ONLY

119838

February 27, 2006

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Equipment Leasing & Acceptance LLC

**Filing Evidence**

- ☒ Plain/Confirmation Copy
- ☐ Certified Copy

**Retrieval Request**

- ☐ Photocopy
- ☐ Certified Copy

**Type of Document**

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Equipment Leasing & Acceptance 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:**

**Mailing Address:**

315 West Ponce DeLeon Avenue

Suite 321

Decatur, GA 30030

**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:

UCC Filing & Search Services, Inc.,

Name

1574 Village Square Boulevard, Suite 100

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

Tallahassee, FL 32309

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.*

Alison Hand, ASST SEC

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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**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

Tim Mercer

315 West Ponce DeLeon Avenue, Suite 321

Decatur, GA 30030

MGRM

Rod Reiman

315 West Ponce De Leon Avenue, Suite 321

Decatur, GA 30030

MGRM

Ray Desrosiers

315 West Ponce De Leon Ave. Suite 321

Decatur, GA 30030

MGRM

Jerry Wilson

315 West Ponce De Leon Ave. Suite 321

Decatur, GA 30030

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

Tim Mercer

\_\_\_\_\_  
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)

**Additional Managing Members**

Roger Sager  
315 West Ponce De Leon Ave.  
Suite 321  
Decatur, GA 30030

Veronica Lee  
315 West Ponce De Leon Ave.  
Suite 321  
Decatur, GA 30030

Lonnie Royer  
315 West Ponce De Leon Ave.  
Suite 321  
Decatur, GA 30030

**Managers**

Dane Nine  
12900 NE Rose Parkway  
Portland, OR 97230

Clifton Sneed  
11333 N. Central Expressway  
Suite 101  
Dallas, TX 75243