## L060000 30650

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ee)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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	Office Use Only	, 00



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SECRETARY OF STATE

MAR 20 AH II: 3:

## **COVER LETTER**

TO: Registration Se Division of Co		,		
SUBJECT: CIC N	larketing, LLC (Name of Limited	d Liability Company)		
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
Susan Ca	abrera			
	Q	Name of Person)		
CIC Mark	eting, LLC		<b>₽</b> ∞_	9
	(	Firm/Company)	E CR	Ub MAK
23049 P	reserve Court		TARY	
		(Address)	H H	P
Lutz, FL	33549		STAL	
	(City.	/State and Zip Code)	Şщ	Č
For further information	concerning this matter, please	call:		
Susan Cabrer	a	at (813 ) 240-05		
(Name	e of Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a check for	or 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)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liab	ility Company is:	
CIC Marketing, LLC (Must end with the words "Limited Liab	oility Company, "Limited Company" or their a	abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and stree	t address of the principal office of	the Limited Liability Company is:
Principal Office Address:	Mailing Addr	ess:
23049 Preserve Court Lutz, FL 33549	23049 Preserve Lutz, FL 33549	
(The Limited Liability Company cannot business entity with an active Florida r	et address of the registered agent a	t designate an individual or another AR AHASS
<del></del>	Name reserve Court Florida street address (P.O. Box NO)	III: 33
Lutz, FL 3		
liability company at the pla registered agent and agree to statutes relating to the propo accept the obligations of n	ace designated in this certificate, I h	to comply with the provisions of all duties, and I am familiar with and

(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:
MGR	Susan Cabrera 23049 Preserve Court Lutz, FL 33549
	SECRETARY OF ALLAHASSEE
·	AM II: 33 OF STATE E, FLORIDA
	nan the date of filing: March 17, 2006 (OPTIONAL) nust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	Sunt Calico
(In accordance w	member or an authorized representative of a member.  with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury stated herein are true.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Susan Cabrera

- \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee