

LO6000058499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

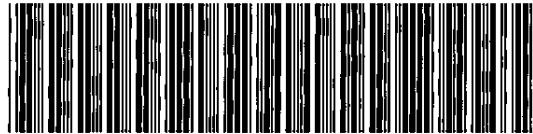
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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06/08/06--01009--010 \*\*130.00

RECEIVED  
06 JUN -8 AM 10:47  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
06 JUN -8 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LO6-58499  
JR

EFFECTIVE DATE

6-9-06

## **COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Shinboa LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian Pratt  
706 Amy Street  
Lynn Haven, FL 32444

For further information concerning this matter, please call: Brian Pratt at (850) 381-1106

Enclosed is a check for the following amount: \$130.00 Filing Fee & Certificate of Status

**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

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06 JUN - 8 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: Shinboa LLC.

## ARTICLE II - Address:

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

**Principal Office Address:**

139 Anita Drive  
Panama City, FL 32404

**Mailing Address:**

139 Anita Drive  
Panama City, FL 32404

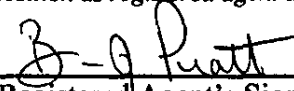
## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's

### Signature:

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

Brian Pratt  
139 Anita Drive  
Panama City, FL 32404

*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

## ARTICLE IV- Manager and Managing Member:

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

**Title:**

Managing Member

**Name and Address:**

Brian Pratt  
706 Amy Street  
Lynn Haven, FL 32444

Manager

Lisa Pratt  
706 Amy Street  
Lynn Haven, FL 32444

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TALLAHASSEE, FLORIDA

EFFECTIVE DATE

6-9-06

ARTICLE V: The effective date is: 9 June 2006.

**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.)

Brian Pratt  
Typed name of signee

**Filing Fees:**  
**\$125.00 Filing Fee for Articles of Organization and Designation**  
**of Registered Agent**  
**\$ 5.00 Certificate of Status (Optional)**

**FILED**  
06 JUN -8 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA