

LO 7000029238

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H07000069735 3)))



H070000697353ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

2007 MAR 16 A 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FLORIDA/FOREIGN LIMITED LIABILITY CO.

blizzard express, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

AL

RECEIVED

07 MAR 16 PM 2:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

H07000069735

(3)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BLIZZARD EXPRESS, LLC

ARTICLE II - Address:

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

Principal Office Address:

35615 STATE RD 70
MYAKKA CITY, FL 34251

Mailing Address:

35615 STATE ROAD
MYAKKA CITY, FL 34251

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

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

NICOLE R. BLIZZARD

Name

35615 STATE RD 70

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

MYAKKA CITY, FL 34251

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.

Nicole R. Blizzard

Registered Agent's Signature

(CONTINUED)

Page 1 of 2

H07000069735

FILED

2007 MAR 16 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H07000069735

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

JAY BLIZZARD
35615 STATE RD 70
MYAKKA CITY, FL 34281


MGRM

NICOLE BLIZZARD
35615 STATE RD 70
MYAKKA CITY, FL 34281

(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.)

NICOLE R. BLIZZARD
Typed or printed name of signer

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 10.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

H07000069735

FILED

2007 MAR 16 A 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA