L07000016512

(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:
→
B

Office Use Only



100106147811

07/23/07--01058--003 **125.00

07 JUL 23 PH 1:52
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Padsorlando, LL.C.		
(Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.	3 1	
Please return all correspondence concerning this matter to the following:	**	
R. Wilson Chantance I		•
(Name of Person)		
iPadsorkando, L.L.C.		
(Firm/Company)		
3712 Howell Brand RJ.	•	
(Address)		
WaterPark Fl. 32792	<i>;</i>	
(City/State and Zip Code)		
For further information concerning this matter, please call:	07 JI	-71
Patrick Dowling an 407 657 MACS AF	UL 23	CONTRACT B 3
(Name of Person) (Area Code & Daytime Telephone Number)		12-43-45 13
Enclosed is a check for the following amount:	PH I:	
S125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \$\bigcup \\$155.00 Filing Fee & \$\bigcup \\$160.00 Filing Fee \\ \chicksim \\$\\ \chicksim \\$\	l: 52	

Malling Address
Registration Section
Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	•
Podsorlando L.C. (Must end with the words "Limited Liability	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
3712 Howell Branch Rd. Winter Park, FL. 32792	3712 Howell Branch Rd. Winter Park, FL. 32792
	<u></u>
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration. Name 3712 Havel Branc Florida street address of the registration.	ress (P.O. Box NOT acceptable RD) Lawrence (P.O. Box NOT acceptable RD)
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limite this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of a proformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "MGR" = Manager "MGRM" = Manag		Name and Address:
MGR		R Wilson Curain tour co- AT.
	-	1924 Houndslake Dr.
	· ·	Winter Park, FL. 32792
	_ ·	
	•	-
	· . -	
. • • سبب		
•		
	- .	
	,	
		•
(Use attachment if	necessary)	
LE V: Effective da	te, if other than the da	
LE V: Effective da Tective date is liste	te, if other than the da d, the date must be s	ate of filing: (OPTIONAL) pecific and cannot be more than five business days prior
LE V: Effective da	te, if other than the da d, the date must be s	
LE V: Effective da fective date is listed days after the date	te, if other than the dad, the date must be se of filing.)	
LE V: Effective da Tective date is liste	te, if other than the dad, the date must be se of filing.)	
LE V: Effective da fective date is listed days after the date	te, if other than the dad, the date must be se of filing.)	
LE V: Effective da fective date is liste days after the date REQUIRED SIGN	te, if other than the dad, the date must be se of filing.)	specific and cannot be more than five business days prior
LE V: Effective da fective date is liste days after the date REQUIRED SIGN	te, if other than the dad, the date must be se of filing.)	
LE V: Effective da fective date is listed days after the date REQUIRED SIGN	te, if other than the dad, the date must be se of filing.) NATURE: Signature of a member of the accordance with section	pecific and cannot be more than five business days prior or an authorized representative of a member.
LE V: Effective da fective date is listed days after the date REQUIRED SIGN	te, if other than the dad, the date must be se of filing.) NATURE: Signature of a member of the accordance with section	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)
LE V: Effective da fective date is listed days after the date REQUIRED SIGN	NATURE: Regnature of a member of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury tein are true.)
LE V: Effective da fective date is listed days after the date REQUIRED SIGN	NATURE: Regnature of a member of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)
LE V: Effective da fective date is listed days after the date REQUIRED SIGN	NATURE: Regnature of a member of this document constitute that the facts stated here	or 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury ein are true.)