L07000085546

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City/	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi		
	*	B

Office Use Only



900106543269

09/07/07--01031--013 **130.00

07 AUG 21 PH 2: 35
SECRETARY OF STATE

COVER LETTER

TO:	Registration Se Division of Co			
SUBJI	ECT:	The Book Exchange, L (Name of Limite	LC d Liability Company)	
The en	closed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please	return all corresp	condence concerning this matte	er to the following:	
	Domi	nic Ciarimboli, Esqu	iire	
		. (Name of Person)	
		··		07 SE TALL
•		(Firm/Company)	AUG CRET AHA
	101	North Main Street		21 SSE
			(Address)	PH PH
	Gree	nsburg, PA 1560	01	STA ?
			/State and Zip Code)	10 A 35
		concerning this matter, please		
Don		mboli, Esquire	at (724) 837-2757 (Area Code & Daytime Telephone Nu:	mber)
	(14411)	, of t 0.3011)	(Alea Code la Bayanne Perephena III.	
Enclo	sed is a check fo	or the following amount:		
□ \$ 12:	5.00·Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certifica (additional copy is enclosed) Certifie	.00 Filing Fee, ate of Status & d Copy at copy is enclosed)
		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	

DOMINIC CLARIMBOLI

ATTORNEY AT LAW 101 N. MAIN STREET

GREENSBURG, PENNSYLVANIA 15601-2407

Menber Pennsylvania Bar Florida Bar

AREA CODE 724-837-2757
FAX 724-837-9241

August 16, 2007

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attention:

Ms. Deborah Bruce Document Specialist

In Re:

The Book Exchange, LLC Ref. Number: W07000038635

Dear Ms. Bruce:

In response to your correspondence dated August 8, 2007, a copy of which is herewith enclosed for identification purposes, and confirming my telephone conversation with your office yesterday, we are resubmitting the Articles of Organization which now indicate the name of the proposed LLC as "The Book Exchange and Comic Shop, LLC.

If you require anything further, please advise us. Thank you for your cooperation.

The Supplemental Control

Yours very truly

Dominic Ciarimboli

DC:dsb

Enclosure

CC: Mr. Curt L. Bourque

130 Yacht Club Drive
North Palm Beach, Fl 33408



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 8, 2007

DOMINIC CIARIMBOLI, ESQ. 101 NORTH MAIN STREET GREENSBURG, PA 15601

SUBJECT: THE BOOK EXCHANGE, LLC

Ref. Number: W07000038635



We have received your document for THE BOOK EXCHANGE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is N05000003904, "BOOK EXCHANGE INC.".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Document Specialist

Letter Number: 707A00048683

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Book Exchange, and Comic Shop, (Must end with the words "Limited Liability Company, "Limit		<u>ч С »</u>)
(Must clid with the words Emilied Elability Company, Emili	to company of their aboreviation 'EEC, or	L.C.,)
ARTICLE II - Address:		
The mailing address and street address of the pr	rincipal office of the Limited Liabi	lity Company is:
Principal Office Address:	Mailing Address:	
807 Northlake Boulevard	807 Northlake Boulevard	
North Palm Beach, FL 33408	North Palm Beach, FL	33408
ARTICLE III - Registered Agent, Registered	l Office, & Registered Agent's Si	ignature:
(The Limited Liability Company cannot serve as its own Regis		
business entity with an active Florida registration.)		O7 ALL
The name and the Florida street address of the	registered agent are:	AR A
		AUG 21
Curt L. Bourque	 .	SS
Name		mo n
130 Yacht Club Drive		FES
	dress (P.O. Box NOT acceptable)	2: 3: ORIG

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.

City, State, and Zip

33408

Registered Agent's Signature (REQUIRED)

North Palm Beach,

(CONTINUED) Page 1 of 2

Title: "MGR" = Manager "MGRM" = Manager		Name and Address:		
MGRM	_	Curt L. Bourque		
		130 Yacht Club Drive	33408	
		North Palm Beach, FL	33406	
	<u> </u>			
	•			
			· · · · · · · · · · · · · · · · · · ·	
	_			
	-			
(Use attachment if	necessary)			
			(ODETO)	
ST TO \$7. TO CC4"	ite, it other than the o	late of filing:specific and cannot be more than f	(OPTION ive business d	,
ffective date is liste		specific and cannot be more than I		
ffective date is liste	e of filing.)	speeme and cannot be more than I		
ffective date is listed days after the date	e of filing.) NATURE:	L. Burque	07 SE TAL	Car
ffective date is listed days after the date REQUIRED SIGN	NATURE:	or an authorized representative of a me	O7 AUG SECRETI TALL NEI A	Control

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

Filing Fees: