

L07000095142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

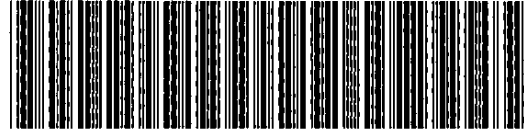
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400109110934

09/18/07--01036--005 **155.00

RECEIVED
07 SEP 18 AM 10:55
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
07 SEP 18 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LAZARUS
CORPORATE FILING SERVICE
3320 SW 87TH AVENUE
MIAMI, FL 33165
305-552-5973

FILED
07 SEP 18 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. PRINT SHOP USA, LLC.

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time

2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

☐ Profit

☐ Not for Profit

☒ Limited Liability

☐ Domestication

☐ Other

AMENDMENTS

☐ Amendment

☐ Resignation of R.A., Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Trademark

☐ Other

Examiner's Initials

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY.**

ARTICLE I

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

PRINT SHOP USA, LLC.

ARTICLE II

**THE MAILING ADDRESS AND STREET ADDRESS OF THE
PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:**

**14224 S.W. 158 CT
MIAMI, FL 33196.**

ARTICLE III

**THE NAME AND THE FLORIDA STREET ADDRESS OF THE
REGISTERED AGENT ARE:**

JENNIFER WILSON

NAME

14224 S.W. 158 CT

FLORIDA STREET ADDRESS, P.O. BOX NOT ACCEPTABLE

MIAMI, FL 33196

CITY, STATE AND ZIP.

FILED
07 SEP 18 PM 3:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 THE 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


JENNIFER WILSON.

ARTICLE IV.

I THE LIMITED LIABILITY COMPANY IS TO BE MANAGED BY ONE MANAGER OR MORE MANAGERS AND IS THEREFORE, A MANAGER - MANAGED COMPANY.

JENNIFER WILSON


SIGNATURE OF 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.)

JENNIFER WILSON.

TYPED OF PRINTED NAME OF SIGNED.