

L07 V00113086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

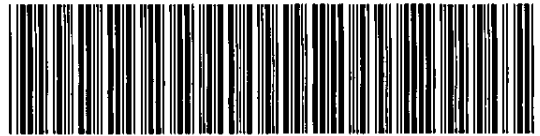
(Document Number)

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RECEIVED
07 NOV -8 AM 10:10
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
07 NOV -8 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

11/5/07

FLORIDA FILING & SEARCH SERVICES, INC.

**P.O. BOX 10662, TALLAHASSEE, FL 32302
155 OFFICE PLAZA DRIVE, SUITE A, TALLAHASSEE, FL 32301
PHONE: (850) 216-0457 / FAX: (850) 216-0460**

DATE: 11/8/2007

EFFECTIVE DATE

11/5/07

FILED
07 NOV -8 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAME: GLOBAL READERS SERVICE LLC

TYPE OF FILING: ARTICLES OF ORGANIZATION

COST: CK FOR \$125 ATTACHED

RETURN:

~~ACCOUNT: FCA000000015~~

~~AUTHORIZATION: PAUL / ABBIE HODGE~~

EFFECTIVE DATE 11/5/07

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Global Readers Service LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

870 North Highway A1A
Suite #1206
Indialantic FL 32903

Mailing Address:

- Same -

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Chris Plum

Name

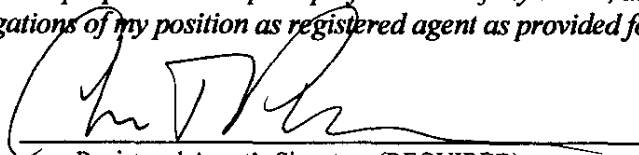
870 North Highway A1A

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

Indialantic FL 32903

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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FLORIDA

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:

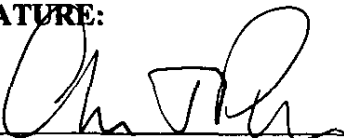
MGR

Chris Plum
870 North Highway
Indian Shores FL 33403

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 11/5/07 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Chris Plum

Typed or printed name of signee

Filing Fees:

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