

LO 7004/5 356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

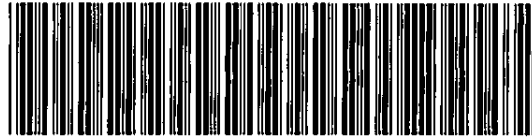
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W07-49222

Office Use Only



200110021002

10/02/07--01019--024 \*\*125.00

2007 NOV 14 P 4:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
AL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 4, 2007

CORPORATE SERVICE CENTER INC.  
101 CONVENTION CENTER DR. STE 700  
LAS VEGAS, NV 89109

SUBJECT: GOODY ENTERPRISES, LLC  
Ref. Number: W07000049222

We have received your document for GOODY ENTERPRISES, LLC and your check(s) totaling \$125.00. 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 existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://www.sunbiz.org).

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 907A00058111

2007 NOV 14 P 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

PHYSICAL: Dept. of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301  
(850) 245-6052

MAILING: Dept. of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

FROM: Corporate Service Center, Inc. C/O Nevada Corporate Headquarters, Inc.  
101 Convention Center Dr., Ste 700  
Las Vegas, NV 89109  
(800) 398-1077  
(702) 889-6812

DATE: Friday, September 28, 2007

*SENT VIA*

To Whom It May Concern:

Attached, please find the following document(s):

- Articles of Organization for **GOODY ENTERPRISES, LLC**

We have included payment in the amount of \$125.00 for the following fees:

- Filing fee -\$125.00
- Other: Please "File" stamp & return other provided copy

If there are any questions, please call Shanisha Wright at 800-398-1077.

Please return the file stamped copy in the postage paid envelope enclosed. Thank you for your continued service!

**FILED**  
2007 NOV 14 P 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GOODENDORF ENTERPRISES, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHANISHA WRIGHT

(Name of Person)

CSC, INC., C/O NEVADA CORPORATE HEADQUARTERS, INC.

(Firm/Company)

101 CONVENTION CENTER DR. STE 700

(Address)

LAS VEGAS, NV, 89109

(City/State and Zip Code)

For further information concerning this matter, please call:

SHANISHA WRIGHT

(Name of Person)

at ( 702 )

873-3488 ext. 3185  
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional 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

2007 NOV 14 P 4: 47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

PHYSICAL: Dept. of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301  
(850) 245-6052

MAILING: Dept. of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

FROM: Corporate Service Center, Inc. C/O Nevada Corporate Headquarters, Inc.  
101 Convention Center Dr., Ste 700  
Las Vegas, NV 89109  
(800) 398-1077  
(702) 889-6812

DATE: Tuesday, November 06, 2007

*SENT VIA*

To Whom It May Concern:

Attached, please find the following document(s):

- Articles of Organization for **GOODENDORF ENTERPRISES, LLC**

Payment was already received in the amount of \$125.00 for the following fees:

- Filing fee -\$125.00
- Other: Please "File" stamp & return other provided copy

If there are any questions, please call Shanisha Wright at 800-398-1077.

Please return the file stamped copy in the postage paid envelope enclosed. Thank you for your continued service!

FILED  
2007 NOV 14 P 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FL 32304

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

GOODENDORF ENTERPRISES, LLC

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

### ARTICLE II - Address:

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

#### Principal Office Address:

1510 3RD CT

VERO BEACH, FL 32960

#### Mailing Address:

1510 3RD CT

VERO BEACH, FL 32960

### 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:

BUSINESS FILINGS INCORPORATED

Name

1203 GOVERNORS SQUARE BLVD., STE 101

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

TALLAHASSEE

FL 32301-2960

City, State, and Zip

FILED  
2007 NOV 14 P 4:47  
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 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 Price, Asst. Secretary*

Registered Agent's Signature (REQUIRED)

*Business Filings Incorporated*

(CONTINUED)

Page 1 of 2

**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

JASON GOODENDORF

1510 3RD CT

VERO BEACH, FL 32960

2007 NOV 14 P 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

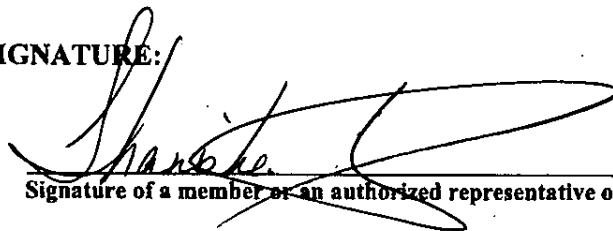
FILED

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (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.)

SHANISHA WRIGHT, ORGANIZER

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)**