15100116756

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
LC		

Office Use Only



000110693660

10/17/07--01046--016 ++160.00

Reject Name

07 NOV 19 AM11: 39

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: 2 Go 2 Marketing						
SUBJECT: 2 6.2 Marketing (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:						
Brandon Newton (Name of Person)						
2 Go 2 Marketing						
(Firm/Company)						
15420 Living Ston Ave #1304 (Address)						
· ; (Address)						
"Lutz, Florida 33559						
City/State and Zip Code)						
For further information concerning this matter, please call:						
Brancion Newton. at (619) 955-7260 (Name of Person) (Area Code & Daytime Telephone Number)						
Brancion Newton. at 619 955-7260 (Name of Person) (Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:						
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\times \text{Certified Copy} (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						

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Δ	RT	CI	JE 1	[_]	Na	me
/1	. 1		JE J	- :		шс

The name of the Limited Liability Company is: 2 go 2 Marketing, 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:

rincipal Office Address:	<u> Mailing Address:</u>
15420 Livingston Ave	
Apt# 1304 1	Apt# 1304
Lutz, Florida 33559	Lute, Florida 33559
ARTICLE III - Registered Ageijt, Reg	istered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its ov business entity with an active Florida registration.)	wn Registered Agent. You must designate an individual or another
The name and the Florida street address	
The name and the Florida street address of	of the registered agent are:
district the second	VISION Name
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Name
Sia	ndon M. Newton 运气置重
Plactic	The state of the s
Fiorida s	rreet address (P.O. Box <u>NOT</u> acceptable)
15420 Livingsto	treet address (P.O. Box NOT acceptable) A Ave Apt # 1304 Lutz, Florida 33559
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)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR MGRM (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.)

M. Newton Brandon

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)