

LO7000/26877

Heather Desguin
(Requestor's Name)

3704 Trevor Ct
(Address)

TM 32303
(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

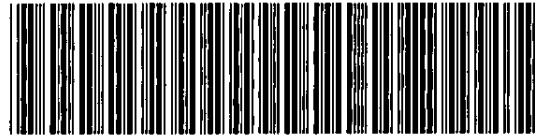
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400112880464

12/24/07--01030--005 **160.00

FILED

07 DEC 24 PM 1:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

07 DEC 24 PM 1:21

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

A. LUNT

DEC 24 2007

EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

L.C.H.Q. Challenge Coins, 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:

3704 Trevor Ct.
TAL, FL 32303

Mailing Address:

3704 Trevor Ct.
TAL, FL 32303

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:

HEATHER L. DESQUIN
Name

3704 Trevor Ct.
Florida street address (P.O. Box **NOT** acceptable)
TAL, FL 32303
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..

Heather L. Desquin
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
07 DEC 24 PM 1:26
CLERK OF STATE
TALLAHASSEE, 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

MGR

Name and Address:

Shane T. Desquin
3704 Trevor Ct.
TAL, FL 32303

(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:

Shane T. Desquin

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.)

SHANE T. DESQUIN

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)

FILED
DEC 24 PM 1:26
CLERK OF STATE
TALLAHASSEE, FLORIDA