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EXAMINER

COVER LETTER

TO: Registration So Division of Co				
SUBJECT: OSV D	esign Group, LLC	;		
Sebule I.		ed Liability Compa	nny)	
The enclosed Articles of	Organization and fee(s) are	submitted for filing	3 .	
Please return all correspo	ondence concerning this matt	er to the following	:	
James E. I		·		
		(Name of Person)		
McCabe L	aw Office			
<u> </u>		(Firm/Company)		
112 N. Mo	nroe Street			
		(Address)		
Williamspo	ort, IN 47993-0205	5		
	(Cit	y/State and Zip Code	:)	
For further information of	concerning this matter, please	e call:		
James E. McC	abe		762-240	
(Name	of Person)	(Area Cod	e & Daytime Tele	phone Number)
Enclosed is a check fo	r the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155,00 Filin Certified Co (additional cop.	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton E 2661 Exc	ourier Addression Section of Corporations duilding ecutive Center Case, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compa	ny is:		
OSV Design Group, LLC			
(Must end with the words "Limited	d Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liabili	ity Compan	y is:
Principal Office Address:	Mailing Address:		
4301 Fortune Place, Suite G Melbourne, FL 32904	4301 Fortune Place, Suite G Melbourne, FL 32904		
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)			_
The name and the Florida street address of		HÝF 80	NSEC.
Wayne Senesac		r\o	
	Name	ಯ	
4301 Fortune Pla	ace, Suite G		
Florida str	eet address (P.O. Box NOT acceptable)	c.o	
Melbourne,	_{FL} 32904	25	
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

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	Wayne Senesac
	4301 Fortune Place, Suite G
	Melbourne, FL 32904
MGRM	Betty L. Vee
	6167 Indigo Crossing Drive
	Rockledge, FL 32955
MGRM	Jerome Ohnstad
	9008 Deer Valley Court
	Waxhaw, NC 28173
	·
(Use attachment if nec	
LE V: Effective date,	an the date of filing: (OPTIONA
fective date is listed, t	ust be specific and cannot be more than five business da
days after the date of	

of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Wayne Senesac

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution

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)