

LO8050010502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

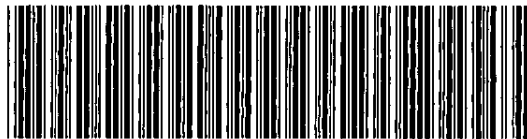
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100116221141

01/28/08--01057--028 **150.00

FILED
08 JAN 28 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JAN 28 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MY Digital Solutions, LLC

(Name of Resulting Florida Limited Company)

The enclosed (), Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

Deborah E. Barrera

(Contact Person)

Digital Solutions, LLC

(Firm/Company)

1591 4th Ave.

(Address)

Vero Beach, FL 32960

(City, State and Zip Code)

FILED
08 JAN 28 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Deborah E. Barrera

(Name of Contact Person)

at (772) 480-1732

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- 175.00
- ☒ ~~\$150.00~~ Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status ☐ \$180.00 Filing Fees and Certified Copy ☐ \$185.00 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MY Digital Solutions, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

1591 4th Ave.

Vero Beach, FL 32960

Mailing Address:

1591 4th Ave.

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 individual or another business entity with an active Florida registration.)

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

Deborah E. Barrera

Name

1591 4th Ave.

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

Vero Beach, FL 32960

FL

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..

Deborah E. Barrera

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
08 JAN 28 PM 3:16
SECRETARY 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

Name and Address:

MGRM

Deborah E. Barrera

1591 4th Ave.

Vero Beach, FL 32960

MGRM

Felix C. Barrera

1591 4th Ave.

Vero Beach, FL 32960

(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:

Deborah E. Barrera

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.)

Deborah E. Barrera

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
08 JAN 28 PM 3:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA