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JAN 31 2008

EXAMINER



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TALLAHASSEE, FLORIDA

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08 JAN 30 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

JAN 31 2008

EXAMINER



PENSON & DAVIS, P.A.
ATTORNEYS

www.pensonanddavis.com

ALBERT C. PENSON
MARY ELLEN DAVIS
JENNIFER L. SWEETING
DONNA S. BIGGINS
ADAM R. COWHEY

January 30 2008
VIA HAND DELIVERY

Replied
☒ 2810 REMINGTON GREEN CIRCLE
TALLAHASSEE, FLORIDA 32308
TEL (850) 561-8000 FAX (850) 561-8030
☐ P.O. BOX 1720 17 HIGH DRIVE, SUITE C
CRAWFORDVILLE, FLORIDA 32320
TEL (850) 926-6003 FAX (850) 926-4944

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08 JAN 30 AM 9:48
TALLAHASSEE, FLORIDA
STATE

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Articles of Organization of Monkey Butts, LLC

Dear Sir or Madam:

Enclosed is an original and one (1) copy of the Articles of Organization of Monkey Butts, LLC. Also enclosed is a check in the amount of \$160.00 representing the \$125.00 filing fee, \$30.00 for the certified copy and \$5.00 for a Certificate of Status that will be picked up by our courier on January 31, 2008.

Should you have any questions or require additional information, please contact me.

Sincerely,

Connie H. Shivers, C.P.
Certified Paralegal
Penson & Davis, P.A.

ACP/chs
Enclosure(s)

ALBERT C. PENSON
MARY ELLEN DAVIS
JENNIFER L. SWEETING
DONNA S. BIGGINS
ADAM R. COWHEY

PENSON & DAVIS, P.A.
ATTORNEYS

ARTICLES OF ORGANIZATION
MONKEY BUTTS, LLC
A LIMITED LIABILITY COMPANY
(Pursuant to Chapter 608, Florida Statutes)

FILED
08 JAN 30 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. **Name.** The name of the limited liability company is:

MONKEY BUTTS, LLC

2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.

3. **Address of Principal Office.** The street address of the principal office of the limited liability company is:

1500-6 Capital Circle, S.E
Tallahassee, Florida 32301

4. **Mailing Address.** The mailing address of the limited liability company is:

P.O. Box 1214
Tallahassee, Florida 32302

5. **Members at Time of Formation.** The name of each member at the time of formation:

Donna Smithey
P.O. Box 1214
Tallahassee, Florida 32302

6. **Period of Duration.** The period of duration shall be perpetual.

7. **Management.** Management of the Limited Liability Company at the time of formation is reserved for the managing member(s).

8. **Registered Agent, Registered Office, and Registered Agents Signature.** The name and the Florida Street address of the registered agent are:

Albert C. Penson
2810 Remington Green Circle
Tallahassee, Florida 32308

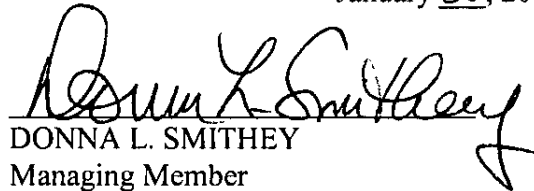
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this Certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisional of all 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.



Albert C. Penson

9. **Effective Date.** The effective date of the limited liability company shall be:

January 30, 2008


DONNA L. SMITHEY
Managing Member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)