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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Caddy Logic, LLC
(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:
Mr. Scott Bishins
'(Name of Person)
Caddy Logic, LLC
(Firm/Company)
3847 Landings Drive
(Address)
Boca Raton, FL 33496
(City/State and Zip Code)
(City/State and Zip Code) For further information concerning this matter, please call:
Mr. Scott Bishins at (561) 999-0366 무의 국
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum \$\sum \text{\$\sum \text{\$\sin \text{\$\sin \text{\$\sin \text{\$\sin \sin \text{\$\sin
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, El. 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:	
Caddy Logic, LLC		
(Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
3847 Landings Drive	3847 Landings Drive	<u></u>
Boca Raton, FL 33496	Boca Raton, FL 33496	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the Mr. Scott Bishins	egistered Agent. You must designate an indivi	S Signature: 2008 FEB 25 P
Na	me	
3847 Landings Dri	ve	3: 19 STATE LORIDA
Florida street	address (P.O. Box NOT acceptable)	10 TG
Boca Raton, FL 33		•
City, Star	te, and Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re	in this certificate, I hereby accept the acity. I further agree to comply with a performance of my duties, and I an	ne appointment as n the provisions of all n familiar with and
Registered Agent's Sig	gnature (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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Mr. Scott Bishins
	3847 Landings Drive
	Boca Raton, FL 33496
MGR	Mr. Dennis Spina
	378 Belfair Oaks Blvd.
	Bluffton, SC 29910
MGR	Mr. Michael Bluestein
	210 W. Rittenhouse Square, Apt. 2606
	Philadelphia, PA 19103
MGR	Mr. Ronald Bluestein
	129 Via Florenza
	Palm Beach Gardens, FL 33418
(Use attachment if necessary)	7A S
LE V: Effective date, if other than th	e date of filing:
	be specific and cannot be more than five business da
days after the date of filing.)	25 SS:
	E.O. P
DECLUDED SIGNATURE	PM FL
REQUIRED SIGNATURE:	OR SI
	/ 5 ^m 5
Signature of a meml	ber or an authorized representative of a member.
	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury I herein are true.)
Coatt Diching	s, Co-Manager

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)

Typed or printed name of signee