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T. CLINE MAR 2 1 2008 **EXAMINER**

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: GUERILLA GRAPHIX, 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:	
CARLOS ARIAS	
(Name of Person)	
(Firm/Company)	
5846 Fishhawk Ridge Drive	
(Address)	
Lithia, FL 33547	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
CARLOS ARIAS (Name of Person) (Name of Person) (Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	-1
S125.00 Filing Fee \$\sum \\$130.00 Filing Fee \& \sum \\$155.00 Filing Fee \& \sum \\$160.00 Filing \text{Fee, } \text{ Certificate of Status } \text{ Certified Copy (additional copy is enclosed)} \text{ Certified Copy (additional copy is enclosed)} \text{ Certified Copy (additional copy is enclosed)}	Ĵ
Mailing Address Street/Courier Address	

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

Street/Courier Address
Registration Section

Division of Corporations Clifton Building 2661 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:	
GUERILLA GRAPHIX, LLC (Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LL.C.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5846 Fishhawk Ridge Drive Lithia, FL 33547	5846 Fishhawk Ridge Drive Lithia, FL 33547
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
CARLOS ARIAS Name	
5846 Fishhawk Rid	dae Drive
	ress (P.O. Box NOT acceptable)
Lithia City, State, a	_ _{FL} 33547 nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	cocept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the process of all formance of my duties, and I am familian will and served agent as provided for in Chapter 108, EST.

(CONTINUED)
Page 1 of 2

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

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

	Title:	Name and Address:		
	"MGR" = Manager "MGRM" = Managing Member	Carlos Arias		
	MGR	5846 Fishhawk Ridge Drive		
		Lithia, FL 33547		
				
	(Use attachment if necessary)			
RT	ICLE V: Effective date if other than the d	ate of filing: (OPTIO)	NALI	
lf an	effective date is listed, the date must be s	specific and cannot be more than five business of	lays pi	ior
or '	90 days after the date of filing.)		•	
	REQUIRED SIGNATURE:			
	//			
	Signature of a member	or an authorized representative of a member.	200	
	(In accordance with section	on 608.408(3), Florida Statutes, the execution	2008 MAR 20	-
	of this document constituent that the facts stated her	ites an affirmation under the penalties of perjury	2 5	* * * * * * * * * * * * * * * * * * *
	CARLOS AR	· · · · · · · · · · · · · · · · · · ·	ŏ	PISH
		ed or printed name of signee	P X	M
		r.σ		N

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)