

Mar 21 2008 5:01PM

CSH SERVICES

15612422812

W08 000032987

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H08000081859 3)))



H080000818593ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CSH SERVICES, LLC
Account Number : 120070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

2008 APR - 1 AM 8:55
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Textterritory LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

RECEIVED

08 APR - 1 AM 6:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

T. CLINE

APR - 2 2008

EXAMINER

4 - 08000681859-3

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

TEXTERRITORY LLC

ARTICLE II ADDRESS

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

3840 LIONS ROAD APT 102-2
COCONUT CREEK, FLORIDA 33073

The mailing address of the Limited Liability Company is:

P.O. Box 970766
COCONUT CREEK, FLORIDA 33097

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

SHERON WRAY
3840 LIONS ROAD APT 102-2
COCONUT CREEK, FLORIDA 33073

Having been named as registered agent 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..

X 
SHERON WRAY / Registered Agent's signature

FILED
2008 APR - 1 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H-08000081859

PAGE 2 TEXTERRITORY LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

Managing Member

SHERON WRAY

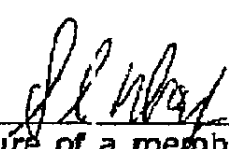
3840 LIONS ROAD APT 102-2

COCONUT CREEK, FLORIDA 33073

2008 APR -1 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

x


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.