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| (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: |  |  |
|   |  |  |
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Office Use Only

B. KOHR

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SECRETARY OF STATE
ALLIAHASSEF, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT: RICKY SOTO** DATE: 04/03/2008 **REF. #:** 001260.84579 CORP. NAME: EDWARD HARRIS JR., LLC ( ) ARTICLES OF INCORPORATION ( ) ARTICLES OF AMENDMENT ( ) ARTICLES OF DISSOLUTION ( ) ANNUAL REPORT ( ) FICTITIOUS NAME ( ) TRADEMARK/SERVICE MARK ( ) FOREIGN QUALIFICATION ( ) LIMITED PARTNERSHIP (XX) LIMITED LIABILITY ( ) REINSTATEMENT ( ) WITHDRAWAL ( ) MERGER ( ) CERTIFICATE OF CANCELLATION ( ) OTHER: STATE FEES PREPAID WITH CHECK# 57072 FOR \$ 125.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$\_\_\_ PLEASE RETURN:

( ) CERTIFICATE OF GOOD STANDING

(XX) PLAIN STAMPED COPY

Examiner's Initials

( ) CERTIFIED COPY

( ) CERTIFICATE OF STATUS

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OS ARROS MISSON

# FLORIDA LIMITED LIABILITY CON ARTICLE I - Name: The name of the Limited Liability Company is: EDWARD HARRIS JR., LLC

#### **ARTICLE II - Address:**

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

| Principal Office Address: | Mailing Address:   |
|---------------------------|--|
| 8840 DORAL OAK DRAPT 2012 | 8840 DORAL OAK DRAPT 2012  |
| TEMPLE TERRACE, FL 33617  | TEMPLE TERRACE, FL 33617   |
|                           |  |
|                           | - Apparatus - Appa |

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Name
8840 DORAL OAK DRAPT 2012
Florida street address (P.O. Box NOT acceptable)

TEMPLE TERRACE, FL 33617

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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

### 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  |   |
| Managing Monot                            | EDWARD HARRIS JR.   |
| MGRM                                      | 8840 DORAL OAK DRAPT 2012   |
|   | TEMPLE TERRACE, FL 33617  |
|   |   |
|   |   |
|   |   |
|   | <u> </u>  |
|   |   |
| (Use attachment if necessary)             | <del></del>   |
| NOTE: An additional article must be added | l if an effective date is requested.  |
| REQUIRED SIGNATURE:                       |   |
| Edward Th.                                |   |
| Signature of a member or an authoriz      | representative of a member.   |
| •   | 108(3), Florida Statutes, the execution ffirmation under the penalties of perjury e.) |

EDWARD HARRIS JR.

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$25.00 Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)