

LOG000039526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

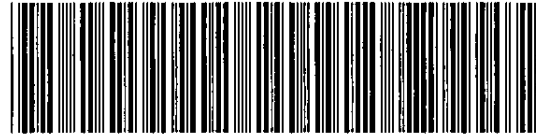
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300126305443

FILED
08 MAY - 1 PM 2: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05/01/08--01037--007 **25.00

808A W 27625

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2008 MAY - 1 PM 12: 23
FORWARDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

B. KOHR

MAY 1 2008

EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PLEASE File Articles
of Correction

HAVE IT ALL!, LLC

FILED
08 MAY -1 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- Art of Inc. File _____
- LTD Partnership File _____
- Foreign Corp. File _____
- L.C. File _____
- Fictitious Name File _____
- Trade/Service Mark _____
- Merger File _____
- Art. of Amend. File Articles of Correction
- RA Resignation _____
- Dissolution / Withdrawal _____
- Annual Report / Reinstatement _____
- Cert. Copy _____
- Photo Copy _____
- Certificate of Good Standing _____
- Certificate of Status _____
- Certificate of Fictitious Name _____
- Corp Record Search _____
- Officer Search _____
- Fictitious Search _____
- Fictitious Owner Search _____
- Vehicle Search _____
- Driving Record _____
- UCC 1 or 3 File _____
- UCC 11 Search _____
- UCC 11 Retrieval _____
- Courier _____

Signature _____

Requested by: Seth 5/1/08 11:00
Name Date Time

Walk-In _____ Will Pick Up _____

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is: HAVE IT ALL!, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

article IV list only one Managing Member. A second
Managing Member should be added as follows:

William Patrick Parrigan, 9569 Marilla Dr., Lakeside,
California 92040

OR

- Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: April 25, 2008

R. Jeffrey Stull
Signature of a member or authorized representative of a member

R. Jeffrey Stull
Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
08 MAY - 1 PM 2:12
FILED

**ARTICLES OF ORGANIZATION
FOR
HAVE IT ALL !, LLC**

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **HAVE IT ALL !, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office address of the company is **500 North Osceola Avenue, #211, Clearwater, FL 33755**. The mailing address of the company is **500 North Osceola Avenue, #211, Clearwater, FL 33755**.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 21 AM 8:17

**ARTICLE III: INITIAL REGISTERED AGENT AND
ADDRESS**

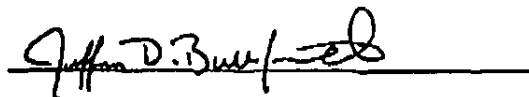
The name and address of the initial registered agent is **R. Jeffrey Stull, P.A., 502 South Boulevard,
Tampa, FL 33606.**

ARTICLE IV: MANAGING MEMBERS

The name and address of the initial Managing Member of the company is:
Pamela Hubbert, Managing Member, 500 North Osceola Avenue, #211, Clearwater, FL 33755.

The undersigned has executed these Articles of Organization this 21st day of April 2008.

"Your Capital Connection, Inc. by, Jeffrey Butterfield, Client Representative"



Authorized Representative

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 21 AM 8:18

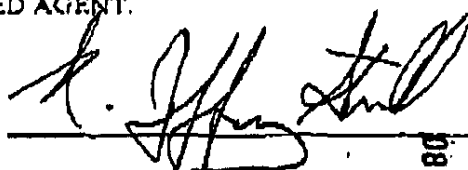
CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1. The name of the company is: HAVE IT ALL I, LLC

2. The name and address of the registered agent and office is:
R. JEFFREY STULL, P.A.
502 South Boulevard
Tampa, FL 33606

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 APR 21 AM 8:18