

L08000050581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

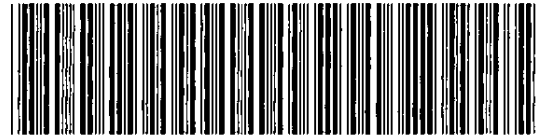
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600129669786

05/21/08--01012--022 **155.00

RECEIVED
08 MAY 21 AM 11:24
CLERK OF SUPERIOR COURT
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 MAY 21 PM 12:35
CLERK OF SUPERIOR COURT
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR

MAY 21 2008

EXAMINER

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, FL 32308

City/St/Zip

850-222

Phone #

FILED
08 MAY 21 PM 12:35
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- SPOTT TRADING, LLC.

2- _____

3- _____

4- _____

☒ Walk-in

☐ Pick-up time ASAP

☒ Certified

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ACCOUNT FILING COVER SHEET

FILED
08 MAY 21 PM 12:35
TALLAHASSEE, FLORIDA

ACCOUNT NUMBER: 0721 00000 307

REFERENCE: 1097
(Sub Account)

DATE: 05/21/08

REQUESTOR NAME: ATTORNEYS' TITLE INSURANCE FUND, INC.

ADDRESS: 1965 Capital Circle NE, Suite A
Tallahassee, FL 32308

TELEPHONE: 850 - 222-2785 ext.

CONTACT NAME: Barbara Keys

CORPORATION NAME: SPOTT TRADING, LLC

DOCUMENT NUMBER
(If applicable)

AUTHORIZATION: 

XXX CERTIFIED COPY (1-9)
 CERTIFICATE OF STATUS (1-9)
 PLAIN STAMPED COPY

<u>XXXX</u> Call When Ready	<u></u> Call if Problem	<u></u> After 2:30
<u></u> Walk In	<u></u> Will Wait	<u></u> Pick Up
<u></u> Mail Out		

**ARTICLES OF ORGANIZATION
FOR
SPOTT TRADING, LLC,
A Florida Limited Liability Company**

The undersigned, desiring to form a limited liability company under and pursuant to Chapters 608, Florida Statutes, the Florida Limited Liability Company Act, does hereby adopt the following Articles of Organization for such Company:

**ARTICLE I
Name**

The name of this Company shall be **SPOTT TRADING, LLC.**

**ARTICLE II
Duration**

The term of existence of the Company shall be perpetual.

**ARTICLE III
Mailing and Street Address**

The mailing and street address of the Company is: P.O. Box 14331, Savannah, Georgia, 31406 and 106 Oglethorpe Professional Court, Savannah Georgia 31406, respectively.

**ARTICLE IV
Registered Agent and Office**

The name and street address of the initial registered agent and office for this Company are as follows: Kerry M. Wilson, 141 5th Street, Winter Haven, Florida, 33883.

**ARTICLE V
Admission of Additional Members;
Terms and Conditions of such Admissions**

Additional Members may be admitted upon unanimous consent of the Members of the Company, upon the written application of such new Member, in the manner set forth in the Operating Agreement of this Company and in accordance with applicable law.

**ARTICLE VI
Management of Company**

The Company is to be a member-managed company.

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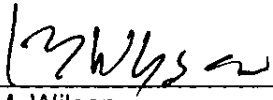
ARTICLE VII
Amendment of Articles of Organization

Any amendment to these Articles of Organization shall be on such form prescribed by the Secretary of State of the State of Florida containing such terms and provisions consistent with Chapter 608, Florida Statutes, as shall be prescribed by the Department of State, and shall be signed and sworn to by all Members of the Company. In the event a new Member is added by such amendment, it shall be also signed by the Member to be added.

ARTICLE VIII
Transferability of Member's Interest


An interest of a Member of this Company may be transferred or assigned only to such extent and in the manner provided in the Operating Agreement of the Company and in accordance with applicable law.

IN WITNESS WHEREOF, the undersigned have hereunto set their hands this 19th day of May, 2008.

By: 
Kerry M. Wilson
Authorized Representative of a Member

STATEMENT OF REGISTERED AGENT

Having been named as Registered Agent to accept service of process for the above-stated limited liability company, 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 in Chapter 608, Florida Statutes.


Kerry M. Wilson

STATE OF FLORIDA
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 19th day of May, 2008, by Kerry M. Wilson who is personally known to me.

(SEAL)  **Patsy L. King**
Commission # DD475958
Expires October 19, 2009
Bonded Tray Firm - Insurance, Inc. 850-385-7016


NOTARY PUBLIC

Print Name of Notary
My Commission Expires: