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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MSP SUBS, 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:	
WILLIE EDWARD PEARSON, JR.	
(Name of Person)	
MSP SUBS, LLC.	
(Firm/Company)	
331 S.E. PORT ST. LUCIE BLVD.	PH 12: 37
(Address)	2
PORT ST. LUCIE, FLORIDA 34984	Ŕ
(City/State and Zip Code)	المس
For further information concerning this matter, please call:	
WILLIE EDWARD PEARSON, JR. at (931) 338-9315	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$\text{\$125.00 Filing Fee}\$ \$\subseteq	•
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLE L. N	
ARTICLE I - Name: The name of the Limited Liability Company is	3:
MSP SUBS, LLC.	
(Must end with the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
331 S.E. PORT ST. LUCIE BLVD.	331 S.E. PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FLORIDA 34984	PORT ST. LUCIE, FLORIDA 34984
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the	istered Agent. You must designate an individual or another 75
WILLIE EDWARD F	PEARSON, JR.
Name	
8891 Okeechobee I	Blvd. #203 ddress (P.O. Box <u>NOT</u> acceptable)
Royal Palm Beach	_{FL} 33411
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, F.S..

Registered Agent's Signature (REQUIRED)

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

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

MGRM	WILLIE EDWARD PEARSON, JR.	
	8891 OKEECHOBEE BLVD. #203	
	ROYAL PALM BEACH, FLORIDA 33411	
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		OB JUN - 9 OF STATE SECRETARY OF STATE I FAME ALASSEE FLOAID
(Use attachment if ne	sary)	P
LE V: Effective date	other than the date of filing: (OPT	(IONAL)
fective date is listed,	date must be specific and cannot be more than five busine	ss days prio
days after the date of	ing.)	
	JRE:	

(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.)

WILLIE EDWARD PEARSON, JR.

Typed or printed name of signee

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)