(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:
L. SELLERS

JUN 20 2008

**EXAMINER** 

Office Use Only

400130254464

06/19/08--01016--024 \*\*125.00

SECRETARY OF STATE

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Edge Capital L.L.C.	
	ed Liability Company)
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this matt	-
Brian Gravatt	
	(Name of Person)
Edge Capital L.L.C.	
	(Firm/Company)
3320 Knights Station Ro	pad
	(Address)
Lakeland, FL 33810	
(City	y/State and Zip Code)
For further information concerning this matter, please	call:
Brian Gravatt	at ( 863 ) 255-5726
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	רם	PT/	CT.	E	T	N۵	me:
~	. IN. I						HIC.

The name of the Limited Liability Company is:

Edge Capital L.L

(Must end with the words "Limited Liability Company, "L.L.C.," or "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:
Edge Capital L.L.C.	Edge Capital L.L.C.
3320 Knights Station Road	3320 Knights Station Road
Lakeland, FL 33810	Lakeland, FL 33810

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

business entity with an active Florida registration.)

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

Brian Gravatt Name

3320 Knights Station Road

Florida street address (P.O. Box NOT acceptable)

Lakeland, FL 33810

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 Signatufe (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE	IV-	Man	ager(s)	or l	Managing	Mem	ber(	(s)	:
	_		_					-	

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

MGRM	_	Brian Gravatt
	_	3320 Knights Station Road
		Lakeland, FL 33810
	_	
	-	
	_	
	_	
(Use attachment if	necessary)	
LE V: Effective da	te, if other than the c	date of filing: (OPTIONA
ffective date is listed days after the date	d, the date must be	specific and cannot be more than five business day
·		

(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.)

# **Brian Gravatt**

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)