

LD8000068073

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



COLLINS & GRASKE
ATTORNEYS & COUNSELORS AT LAW

JOHN C. COLLINS
LESLIE S. GRASKE

AN ASSOCIATION OF INDEPENDENT ATTORNEYS
333 SOUTH MAIN - SUITE 304 - AKRON, OH 44308

PH 330 374 6906
FX 330 374 6908

July 8, 2008

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Spin-Win Amusements, LLC; Famous Spin-Win Arcade, LLC; and
Spin-Win Arcade, LLC

Dear Sir or Madam:

Please find enclosed herein the following:

1. The original Articles of Organization for Florida Limited Liability Company for Spin-Win Management, LLC.
2. A check made payable to the Florida Department of State in the amount of \$125.00 for the fee to file all three Articles of Organization.

If you have any questions or need anything further, please give me a call at any time.

Very truly yours,

John C. Collins

JCC/da
Enclosure

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Spin-Win Management, 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:

John C. Collins, Esquire

(Name of Person)

Collins & Graske

(Firm/Company)

333 S. Main Street, Suite 304

(Address)

Akron, Ohio 44308

(City/State and Zip Code)

For further information concerning this matter, please call:

John C. Collins

(Name of Person)

at (**330**) **374-6906**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, 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

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TALLAHASSEE FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Spin-Win Management, LLC

(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:

11911 Indian River Drive
Jensen Beach, FL 34957

Mailing Address:

11911 Indian River Drive
Jensen Beach, FL 34957

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:

John C. Collins

Name

11911 Indian River Drive

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

Jensen Beach, FL 34957

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)

(CONTINUED)
Page 1 of 2

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08 JUL 14 AM 10:01
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TALLAHASSEE FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

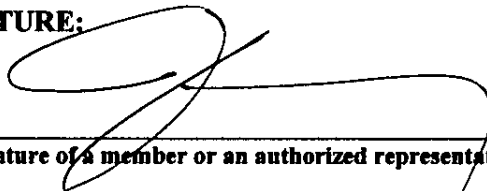
Name and Address:

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(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.)

John C. Collins

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)

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TALLAHASSEE FLORIDA