# 108000086408

(Requestors 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



400135399664

09/10/08--01032--002 \*\*155.00

2008 SEP 10 PM 12: 46
SECRETARY OF STATE

D. BRUCE

SEP 1 1 2008

**EXAMINER** 

MyCorporation Conception of QuickBooks

Toll Free: 1-888-692-6771

26520 Agoura Road Calabasas, CA 91302 Direct/Intl': 1-818-879-9079 | Fax: 1-818-879-8005 e-mail: info@mycorporation.com

## ROUTINE SERVICE FILING REQUEST

Wednesday, August 20, 2008

Division of Corporations Florida Department of State Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RY OF ST

Re: Ultimate Vending Co., LLC

Ladies and Gentlemen:

Please find enclosed for filing Articles of Organization for the above referenced company.

Enclosed is a check in the amount of \$155.00 for filing and for a certified copy.

Please return the **certified copy** to the address below.

Thank you for your assistance.

Sincerely,

MyCorporation Business Services, Inc. 26520 Agoura Road Calabasas, CA 91302 ATTN: FULFILLMENT DEPARTMENT

## Articles of Organization For Ultimate Vending Co., LLC Florida Limited Liability Company

### **ARTICLE I - Name:**

The name of the Limited Liability Company is Ultimate Vending Co., LLC.

### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

10138 Kingsbridge Ave. Tampa, Florida 33626

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Michael R. Petrucci 10138 Kingsbridge Ave. Tampa, Florida 33626

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.

Michael R. Petrucci, Registered Agent

### **ARTICLE IV - Management:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Michael R. Petrucci 10138 Kingsbridge Ave. Tampa, Florida 33626

Monica L. Petrucci 10138 Kingsbridge Ave. Tampa, Florida 33626

Anthony C. Russo 1423 Pine Glen Lane #D2 Tarpon Springs, Florida 34688

Meghan Record, Organizer

2008 SEP 10 PH 12: 46
SECRETARY OF STATE
TALLAHAS SEE, FLORING