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(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	





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C. LEWIS
NOV 182008
EXAMINER

Roger S. Saunders ROGER THAT, L.L.C. 622 Foxtail Court Naples, Florida 34104

(239) 643-2459

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Dear Sir / Madam:

I am requesting to form a Limited Liability Corporation in the State of Florida under the name of "Roger That". Please find the necessary completed forms enclosed with this letter. Also, please find a check for \$130, payable to the Florida Department of State. This check covers the cost of Filing Fee & Certificate of Status.

I am / will be the Manager of this L.L.C., which will be named "Roger That". This concern is a Marketing Services entity.

Thank you for your assistance in processing this request, and in the formation of this L.L.C.

Sincerely,

Roger S. Saunders

COVER LETTER

` то:	Registration Se Division of Cor			
CUDIE	·CT.	ROGER -	THAT	
SUBJE	.C1:	(Name of Lin	nited Liability Company)	
The end	closed Articles of	Organization and fee(s) as	re submitted for filing.	
Please	return all correspo	ondence concerning this m	atter to the following:	
	Ŕ	COGER S. S	(Name of Person)	
•	· · · · · · · · · · · · · · · · · · ·		(Name of Person)	
		ROGER	TIAT (Firm/Company)	
,				
		622	FOXTA1L CO	URT
			(Address)	
		NAPLE	S FLORIDA City/State and Zip Code)	34104
•		(0	City/State and Zip Code)	
For fur	ther information o	oncerning this matter, ple	ase call:	
<u> </u>	OG-ER	S. SAUND HO of Person)	25 at (239) 643 - (Area Code & Daytime Tele	2459 phone Number)
		r the following amount:	_	
\$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	2 \$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 Corporation P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	ircle

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY.

TALLAHASSEE, FLORIDA

ARTICL	ΕI	- Nai	me:
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The name of the Limited Liability Company is:

ROGER THAT L.L.C.,

(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:
NAPLES, FL. 34104	622 FOXTAIL COURT NAPLES, FLORIDA 34104

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:

ROGER 5. SAUNDERS

Name

622 FOXTAIL COURT

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

WAPLES FL 34104

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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ARTICLE IV- Manager(s) or Mana	aging Member(s):	
The name and address of each Manag		follows: pM 2: 29
	,· <i>GG</i>	SOOD MOA I I I I I I I I I I I I I I I I I I I
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SEURETART LISTATE TALLAHASSEE, FLORIDA
MGR	ROGER S. 622 FOXI NAPLES, F	SAUNDERS THIC COURT LORIDA 39104
·		
(Use attachment if necessary)	/	/
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must be to or 90 days after the date of filing.)	date of filing: ////// e specific and cannot be more	<u>2008</u> . (OPTIONAL) than five business days prior
REQUIRED SIGNATURE:		
b loge	NS. Saun	ders
Signature of s/membe	r or an authorized representative	or 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.)

ROGER 5. SAUNDERS
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)