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· (Requ	uestor's Name)	
(Addr	ess)	
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(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busir	ness Entity Nar	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

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SECRETARY OF STATE
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EXAMINER



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

November 10, 2008

JOHN HENNING 1155 MADISON AVENUE NEW SMYRNA BEACH, FL 32168

SUBJECT: ATLANTIS AUCTIONS, LLC Ref. Number: W08000051127

We have received your document for ATLANTIS AUCTIONS, LLC and vour check(s) totaling \$185.00. However, the enclosed document has not been total total total and is being returned for the following correction(s):

The converting Florida entity must be active on our records.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 008A00056697

COVER LETTER

TO: Registration S Division of C			
	•		
SUBJECT: Atlant	is Auctions, LLC (Name of Resulting	g Florida Limited Company	<u>, </u>
	- · · ·		•
	ısiness Entity" into a '	rticles of Organization, "Florida Limited Liabil	and fees are submitted to lity Company" in
Please return all corr	espondence concernin	g this matter to:	
Inha B.H			SET
John D Henning	(Contact Person)		空港
Allert a Arrettaine III O	(condet i cison)		ASTAR
Atlantis Auctions, LLC	(Firm/Company)		SESC
	(1 min company)		77
1155 Madison Ave.	<u> </u>		
	(Address)		<u>ā</u> m
New Smyrna Beach, F	L 32168		en e
15 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	City, State and Zip Code)		••
	•		
For further information	on concerning this ma	tter, please call:	
John D Henning		_at (_386) 690-	2543
(Name of Conta	ct Person)	(Area Code and Da	aytime Telephone Number)
Enclosed is a check f	or the following amou	int:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filing Fees and Certified Copy	Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILING A	ADDRESS:
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
Clifton Building		P. O. Box 6327	
2661 Executive Center Tallahassee, FL 3230		Tallahassee,	FL 32314
ranulusee, IL J2J(71		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	is:	
Atlantis Auctions, LLC		
(Must end with the words "Limited Liability Company," the "LLC.")	abbreviation "L.L.C.," or the designation	,
ARTICLE II - Address: The mailing address and street address of the Liability Company is:	•	
ر از از الاستان الله الاستان الله الله الله الله الله الله الله ال	770g	
Principal Office Address:	Mailing Address:	***************************************
1155 Madison Ave	1155 Madison Ave. S 0	
New Smyrna Beach, FL 32168	New Smyrna Beach. FL 32168	
ARTICLE III - Registered Agent, Register Signature: (The Limited Liability Company cannot serve as its own Regindividual or another business entity with an active Florida registration.)	س س	
The name and the Florida street address of the	e registered agent are:	
John D Henning		
Na	me	
1155 Madison Ave.	4.	

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.

New Smyrna Beach

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

City, State, and Zip

FL 32168

Registered Agent's Signature (REQUIRED)

QØNTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGR	John D Henning	
	1155 Madison Ave.	
	New Smyrna Beach, FL 32168	
	EC 8	
	OR CR	
	Dri W	
		
	(Use attachment if necessary)	
ARTICLE V: Effective date, if other than	n the data of filings	
TRICES V. Effective date, if other man	(OPTIONAL)	
The effective date: 1) cannot be prior	to nor more than 90 days after the date this	
	tment of State; AND 2) must be the same as	
	ed Certificate of Conversion, if an effective	
late is listed therein.)		
DECLIDED CICNATURE.		
REQUIRED SIGNATURE:		
Signature of a member or a	n authorized representative of a member.	
of this document constitutes a	608.408(3), Florida Statutes, the execution in affirmation under the penalties of perjury ts stated herein are true.)	
John D	Henning 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)

Page 2 of 2