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(Requestor's Name)	
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SECRETARY OF STATE

D. BRUCE

JAN 0 6 2009

**EXAMINER** 

Jae Garrison

### Joseph E. Garrison, CPA, PA

**Certified Public Accountant** 

Voice: 727/535-2257 Fax: 727/535-3034 e-mail: jegcpa@ij.net

December 30, 2008

Department of State Division of Corporations P.O. Box 6327 Tallahassee FL 32314

re:

Ellen Annis, LLC

Dear Sir or Madam:

On behalf of the above referenced company, I am forwarding an original and one copy of its Articles of Organization, together with a check in the amount of \$130.00 in payment of the following:

Fee for filing Articles of Organization	\$ 100.00
Filing a Certificate designation Registered Agent	25.00
Fee for a Certificate of Status	5.00
Total payment	\$ 130.00

If you have any questions concerning this request, please free to call my office.

Sincerely yours,

Joseph E. Garrison

Certified Public Accountant

c: Ellen Annis, LLC

#### ARTICLES OF ORGANIZATION OF

#### Ellen Annis, LLC

#### A FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I: NAME**

The name of the Limited Liability company shall be: Ellen Annis, LLC.

#### **ARTICLE II: ADDRESS**

The mailing address and street address of this limited liability company is:

211 Buena Vista Drive North

Dunedin FL 34698

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

#### ARTICLE III: EFFECTIVE DATE AND DURATION

The company's existence shall commence **January 1, 2009** and shall continue until terminated, liquidated, or dissolved by law or by the unanimous consent of the Members.

#### **ARTICLE IV: MANAGEMENT**

The Limited Liability Company is to be managed by its sole Member and the name and address of such Member is:

Ellen A. Annis
211 Buena Vista Drive North
Dunedin FL 34698

EFFECTIVE DATE 1-01-09

#### ARTICLE V: ADMISSION OF NEW MEMBERS

The right, if given, of the members to admit additional members and the terms and conditions of the admission shall be:

The manager may admit new members in its sole discretion subject to the condition that such additional member agree in writing to be bound as a member to the Operating Agreement of the Company.

## ARTICLE VI: INITIAL REGISTERED OFFICE, AGENT, AND AGENT'S SIGNATURE:

The initial Registered Agent and the Registered Agent office of this Limited Liability Company are:

Ellen A. Annis
211 Buena Vista Drive North
Dunedin FL 34698

FILED

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SECRETARY OF STA
TALLAHASSEE, FLOR

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

#### Signature of a member or an authorized representative 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 are stated herein are true.

Dated this 31st day of December 2008.

Ellen A. Annis