L09000003779

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





000139370990

12/31/08--01050--003 **130.00

Effective Date 12/30/08

SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

JAN 1 3 2009

EXAMINER

COVER LETTER

TO:

TO: Registration S Division of Co		• •	
SUBJECT: FIVE-C	D-ONE WEBBS LI	_C	
SUBJECT:		ed Liability Company)	
•			
	f Organization and fee(s) are		
Please return all corresp	ondence concerning this matt	er to the following:	
KERNAN			
		(Name of Person)	
FIVE-O-O	NE WEBBS LLC		
		(Firm/Company)	
501 SOUT	TH FORT HARRIS		
		(Address)	
CLEARWA	ATER, FL 33756		
	(Cit	y/State and Zip Code)	
For further information	concerning this matter, please	e call:	
KERNAN H. W	/EBB	_at (_727) 733-3900	
	of Person)	_ at ()	hone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy	\$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 Circular Section 1 (2011)	rcle



RECEIVED

09 JAN 12 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

January 5, 2009

KERNAN H WEBB 501 S FORT HARRISON AVE CLEARWATER, FL 33756

SUBJECT: FIVE-O-ONE WEBBS LLC

Ref. Number: W0900000124

We have received your document for FIVE-O-ONE WEBBS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 509A00000069

Effective Date 12/30/08

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	•
FIVE-O-ONE WEBBS LLC (Must end with the words "Limited Liability")	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
501 South Fort Harrison Avenue	501 South Fort Harrison Avenue
Clearwater, FL 33756	Clearwater, FL 33756
-	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the research KERNAN H. WEBB Name 501 South Fort Harris Florida street address	ered Agent. You must designate an individual or another egistered agent are:
Clearwater, FL 33756	• • •
City, State, ar	· · · · · · · · · · · · · · · · · · ·
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited as a certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)
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 Memb	er ·
MGR	KERNAN H.WEBB
	501 SOUTH FORT HARRISON AVENUE
	CLEARWATER, FL 33756
(Use attachment if necessary)	
ARTICLE V: Effective date, if other to the control of the date of filling.)	than the date of filing: 12/30/2008 (OPTIONAL) must be specific and cannot be more than five business days prior
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.)

KERNAN H. WEBB

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)